

SECRET

GOODPASTURE, ANN L. FERNAND 5-2303

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
										28 June 1973	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)									
057303		GOODPASTURE, Ann L.									
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE REQUESTED				5. CATEGORY OF EMPLOYMENT					
Under CIA Retirement & Disability System (F.W. ESL)		MONTH 06 DAY 30 YEAR 73				Regular					
6. FUNDS		X		V TO V		V TO CF		7. PAN AND NSCA		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
								3227-0183 0000		Public Law 88-643 Section 231	
9. ORGANIZATIONAL DESIGNATIONS										10. LOCATION OF OFFICIAL STATION	
DDO/CI Staff Development Complement										Washington, D.C.	
11. POSITION TITLE					12. POSITION NUMBER			13. CAREER SERVICE DESIGNATION			
Ops Officer					9997			D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES			16. GRADE AND STEP		17. SALARY OR RATE		
GS				0136.01			13 7		, 23,642		
18. REMARKS											
Subject has been on Extended sick leave & Disability retirement since 14 June 1972											
cc: Finance and Security											
19a. SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		19b. SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED	
M. D. McCallum, CI Staff				6/28/73		H. J. Leberman				6-29-73	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. HQ/OTIS CODE	
45 40				NUMERIC ALPHABETIC							
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA	
MO DA YR		MO DA YR		MO DA YR		MO DA YR		MO DA YR		MO DA YR	
11 12 73											
31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ. NO.		34. SEX		35. VET PREFERENCE		36. SERV. COMP. DATE	
HE. 00. 0. 0								CODE		MO DA YR	
								0-NONE		MO DA YR	
								1-5 PT.		MO DA YR	
								2-10 PT.		MO DA YR	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE		42. LEAVE CAT. CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA		45. POSITION CONTROL CERTIFICATION		46. OP APPROVAL	
CODE		CODE		CODE		CODE		7-5-73		Michael P. Bradley	
0-NO PREVIOUS SERVICE		1-YES		NO TAX EXEMPTIONS		FORM EXECUTED				7/5/73	
1-NO BREAK IN SERVICE		2-NO		FORM EXECUTED		1-YES					
2-BREAK IN SERVICE (LESS THAN 3 YEARS)				2-NO		2-NO					
3-BREAK IN SERVICE (MORE THAN 3 YEARS)											

FORM 1152

USE PREV

SECRET

CLASSIFIED BY: 01-3332

EX-2  
APDIB

(4)

Executive Registry

4 September 1973

Miss Ann L. Goodpasture  
4200 Cathedral Avenue, N. W.  
Washington, D. C. 20016

Dear Miss Goodpasture:

As you bring to a close your active career of service to your country, I join your friends and colleagues in wishing you well in your retirement.

It takes the conscientious efforts of many people to do the important work of this Agency. You leave with the knowledge that you have personally contributed to our success in carrying out our mission. Your faithful and loyal support has measured up to the high ideals and traditions of the Federal service.

May I extend to you my sincere appreciation for the important work you have done.

Sincerely,

/s/ W. E. Colby

W. E. Colby  
Director

Distribution:

- 0 - Addressee
- 1 - D/Ters
- 1 - OPF
- 1 - ROB
- 1 - ROB Reader

Originator: /s/ John F. Blake  
Director of Personnel

OP/RAD/ROB/NFM/lks

ADMINISTRATIVE AND SECURITY USE ONLY

OPF

6-30-73

6 September 1973

MEMORANDUM FOR: Chief, CI/OPS  
THROUGH : Deputy Director for Operations  
SUBJECT : Career Intelligence Medal  
for Miss Ann L. Goodpasture

The Honor and Merit Awards Board is pleased to notify you that the Career Intelligence Medal has been approved for Miss Ann L. Goodpasture. You are requested to inform her of the award and of the security considerations contained in the attached memorandum from the Office of Security. Arrangements for presentation may be made with the Executive Secretary, Honor and Merit Awards Board, extension 3645, room 412, Magazine Building.

/s/ R. L. Austin, Jr.

R. L. Austin, Jr.  
Recorder

Honor and Merit Awards Board

Att

## Distribution:

- 0 & 1 - Addressee
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- 1 - Exec Sec/HMAB
- 1 - Recorder/MMAB

ADMINISTRATIVE AND SECURITY USE ONLY



23-3474  
CFF

REPORT OF HONOR AND MERIT AWARDS BOARD					DATE	
					14 August 1973	
The Honor and Merit Awards Board having considered a recommendation that:						
SERIAL OR ID NO.	NAME (Last, First-Middle)			BIRTH YEAR	SEX	TYPE EMPLOYEE
057303	GOODPASTURE, Ann L.			1918	F	Staff
OFFICE OF ASSIGNMENT		SD	SCHEDULE	GRADE	STATION	
DO/CI		D	GS	13		
BE AWARDED						
Career Intelligence Medal						
<input type="checkbox"/> FOR HEROIC ACTION ON						
<input checked="" type="checkbox"/> FOR MERITORIOUS SERVICE OR ACHIEVEMENT DURING THE PERIOD September 1947 - June 1973						
<input checked="" type="checkbox"/> RECOMMENDS APPROVAL <input type="checkbox"/> DOES NOT RECOMMEND APPROVAL						
<input type="checkbox"/> RECOMMENDS AWARD OF						
UNCLASSIFIED CITATION						
<p>Miss Ann L. Goodpasture is hereby awarded the Career Intelligence Medal in recognition of her exceptional achievement for more than 25 years. A charter member of the Central Intelligence Agency, Miss Goodpasture has excelled as an operations officer both overseas and in headquarters. Her performance throughout her career has been outstanding and marked by a high degree of competence and unusual dedication to duty. Miss Goodpasture has contributed substantially to the mission of the Agency, reflecting credit on her and the Federal service.</p>						
REMARKS						
(Recommendation approved by ADD/O on 2 August 1973)						
APPROVED				SIGNATURE		
/s/ W. E. Colby				/s/ John F. Blake		
DIRECTOR OF CENTRAL INTELLIGENCE				TYPED NAME OF CHAIRMAN, HONOR AND MERIT AWARDS BOARD		
4 SEP 1973				John F. Blake		
DATE				SIGNATURE		
				/s/ R. L. Austin, Jr.		
				TYPED NAME OF RECOMMENDATION		
				R. L. Austin, Jr.		

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(When Filled In)

OFF

RECOMMENDATION FOR HONOR OR MERIT AWARD (Submit in triplicate - see HR 20-37)										
<b>SECTION A</b>					<b>PERSONAL DATA</b>					
1. EMP. SER. NO.	2. NAME OF PERSON RECOMMENDED (Last, First, Middle)				3. POSITION TITLE	4. GRADE	5. SS			
057303	Goodpasture, Ann Lorene				Ops Officer	GS-13	0			
6. OFFICE OF ASSIGNMENT		7. OFFICE EXT. (If any)		8. STATION						
DDO/CI Staff				<input checked="" type="checkbox"/> HEADQUARTERS <input type="checkbox"/> FIELD (Specify location)						
9. HOME ADDRESS (No., St., City, State, ZIP Code)					10. HOME PHONE		11. CITIZENSHIP AND HOW ACQUIRED			
4200 Cathedral Ave., Wash., D.C.					244-1657		U.S. Birth			
12. RECOMMENDED AWARD					13. IF RETIRING, DATE OF RETIREMENT		14. POSTHUMOUS			
Career Intelligence Medal					23 October 1973		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
15. NAME OF NEXT OF KIN			16. RELATIONSHIP		17. HOME ADDRESS (No., St., City, State, ZIP Code)		18. HOME PHONE			
C. H. Goodpasture			Father		Livingston, Tenn.					
<b>SECTION B</b>										
RECOMMENDATION FOR AWARD FOR HEROIC ACTION OR ACCEPTANCE OF HAZARD										
19. WERE YOU AN EYEWITNESS TO THE ACT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO										
PERSONNEL IN IMMEDIATE VICINITY OR WHO ASSISTED IN ACT OR SHARED IN SAME HAZARD:										
20. FULL NAME					21. ORGN. TITLE		22. GRADE		23. OFFICE OF ASSIGNMENT	
LIST ANY OF THE ABOVE PERSONS GIVEN AN AWARD OR RECOMMENDED FOR AWARD FOR PARTICIPATING IN ACT:										
24. FULL NAME					25. AWARD RECOMMENDED					
CONDITIONS UNDER WHICH ACT WAS PERFORMED:										
26. LOCATION			27. INCLUSIVE DATES			28. TIME OF DAY				
29. PREVAILING GEOGRAPHIC CONDITIONS AND OBSTACLES ENCOUNTERED										
30. DATES FOR WHICH AWARD RECOMMENDED			31. ASSIGNMENT COMPLETED			32. NOW IN SAME OR RELATED ASSIGNMENT				
			<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
<b>SECTION C</b>										
RECOMMENDATION FOR AWARD FOR ACHIEVEMENT, SERVICE, OR PERFORMANCE										
33. DO YOU HAVE PERSONAL KNOWLEDGE OF THE SERVICE OR PERFORMANCE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO										
34. OFFICIAL ASSIGNMENT OF PERSON RECOMMENDED AT TIME OF SERVICE OR PERFORMANCE										
Headquarters										
35. COMPONENT OR STATION (Designation and location)										
DDO/WH										
36. DUTIES AND RESPONSIBILITIES OF ASSIGNED POSITION										
Operations officer completing 30 years of service in the Agency and its predecessor organizations.										
37. INCLUSIVE DATES FOR WHICH RECOMMENDED			38. ASSIGNMENT COMPLETED			39. NOW IN SAME OR RELATED ASSIGNMENT				
1947 - 1973			<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
PERSONNEL WHO ASSISTED OR CONTRIBUTED SUBSTANTIALLY TO THE SERVICE OR PERFORMANCE:										
40. FULL NAME					41. ORGN. TITLE		42. GRADE		43. OFFICE OF ASSIGNMENT	
Mr. Winfield Scott							GS-18		Mexico City	
LIST ANY OF THE ABOVE PERSONS GIVEN AN AWARD OR RECOMMENDED FOR AWARD FOR PARTICIPATING IN THE PERFORMANCE										
44. FULL NAME					45. TYPE OF AWARD					
Mr. Winfield Scott										

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SECTION D		NARRATIVE DESCRIPTION	
<p>Award for Heroic Action or Acceptance of Hazard: Was act voluntary? Describe why act was outstanding, and if it was more than normally expected. Explain, why, and how. If an aerial or marine operation, describe type and position of craft, crew position of individual, and all unusual circumstances. Indicate results of the act. Enclose unclassified citation.</p> <p>Award for Achievement, Service, or Performance: State character of service during period for which recommended. (Give complete description of administrative, technical, or professional duties and responsibilities if not covered in Section C, include dates of assignment and relief.) What did the individual do that merits the award? Why was this outstanding when compared to others of like grade and experience in similar positions or circumstances? If appropriate, include production records and assistance rendered by other persons or units. What obstacles were encountered or overcome? Indicate results of achievement, service, or performance. Include reference to Fitness Reports, Letters of Commendation, or other documentation already on file which supports this recommendation. Enclose unclassified citation.</p>			
<p>Miss Goodpasture has been on sick leave since July 1972 awaiting medical retirement in October 1973. She is a charter member of the Agency, having entered on duty from OSS and its successor organizations. Her career is highly distinguished by virtue of consistently strong to outstanding performance, all of which is fully documented.</p> <p>In addition to several staff and desk assignments, Miss Goodpasture served in support of the successful coup against the communist government in Guatemala in 1954 and completed tours of duty in Bombay, Monterrey and Mexico City. Undoubtedly, the high point of her career occurred during her service in Mexico City from 1957 through 1970, where she served as a "trouble-shooting" case officer for the incomparable Winfield Scott (deceased), who was then the Chief of Station. Mr. Scott, a stern taskmaster, described Miss Goodpasture over these years as "intelligent, hard-working, conscientious, versatile, valuable and unquestionably one of the most competent CI/CE officers he ever had the privilege of working with." Miss Goodpasture's fitness reports were totally consistent with this appraisal, and were characterized by outstanding ratings. In her final assignment prior to acute medical problems, she worked for the CI Staff (October 1970-October 1971), earning the following remarks from her supervisor: "...I venture to rate her overall performance, thirty years of it, as Outstanding. Ann is one of the tough warp-threads on which this organization is woven, and when she retires the fabric of this organization will be weakened." The reviewing official agreed with the above and recorded his hope that Miss Goodpasture get the official Agency recognition she so richly deserves for the many years she has made substantive</p> <p>CONTINUED ON ATTACHED SHEET</p>			
46. ENCLOSURES (List individually) IF ORIGINATOR IS NOT AN EYEWITNESS OR DOES NOT HAVE PERSONAL KNOWLEDGE OF THE ACT OR PERFORMANCE, ATTACH AFFIDAVITS OF EYEWITNESS OR INDIVIDUALS HAVING PERSONAL KNOWLEDGE OF THE FACTS.			
1. PROPOSED CITATION			
2.			
3.			
47. RECOMMENDATION INITIATED BY  David A. Phillips		48. TITLE AND SIGNATURE OF EMPLOYEE MAKING RECOMMENDATION  Chief, WH Division	
		49. DATE  21 JUN 1973	
SECTION E RECOMMENDATION FORWARDED THROUGH OFFICIALS CONCERNED FOR THEIR INFORMATION			
50. HEAD OF <u>D</u> CAREER SERVICE (Career service of nominee)		TITLE AND SIGNATURE  See Item #52	
		DATE	
51. DEPUTY DIRECTOR OF CAREER SERVICE		TITLE AND SIGNATURE  See Item #52	
		DATE	
52. DEPUTY DIRECTOR OF OPERATING COMPONENT		TITLE AND SIGNATURE  David H. Bell Deputy Director for Operations	
		DATE  2 JUN 1973	

SECRET

11/11/72 C-Norm Money

SECRET  
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 10 October 1972	
1. SERIAL NUMBER 057303		2. NAME (Last-First-Middle) GOODPASTURE, Ann L.					
3. NATURE OF PERSONNEL ACTION Extended Sick Leave Disability Retirement				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 10 23 72		5. CATEGORY OF EMPLOYMENT Regular	
6. FUNDS X V TO V CP TO V		V TO C C TO C		7. FINANCIAL ANALYSIS NO. CHARGEABLE 5227-0183-0000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP/CI Staff Development Complement				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE Ops Officer				12. POSITION NUMBER 9997		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 13 7		17. SALARY OR RATE \$ 22,487	
18. REMARKS  X Other  NTE: 10-23-73  5/2/73 5/2/73							
19A. SIGNATURE OF REQUESTING OFFICIAL M. D. McCallum, CI Staff				DATE SIGNED 10/10/72		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER Dan McCallum	
				DATE SIGNED 10 OCT 1972			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19 ACTION CODE 31		20 EMPLOY CODE 40		21 WORK CODE 51997 CI		22 STATION CODE 75013	
23 INTEGRITY CODE		24 HONORS CODE		25 DATE OF BIRTH MO. DA. YR. 11 28 18		26 DATE OF GRADE MO. DA. YR.	
27 DATE OF LEI MO. DA. YR.		28 NTE EXPIRES MO. DA. YR. 10/23/73		29 SPECIAL REFERENCE SL		30 RETIREMENT DATA 1-CC 2-ORCH 3-FICA 4-NONE	
31 SEPARATION DATA CODE		32 CORRECTION-CANCELLATION DATA TYPE MO. DA. YR.		33 SECURITY REG. NO.		34 SEX	
35 VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36 SERV COMP. DATE MO. DA. YR.		37 LONG. COMP. DATE MO. DA. YR.		38 CAREER CATEGORY CAR/RES PROV. TEMP	
39 FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1-YES 2-NONE		40 SOCIAL SECURITY NO.		41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42 LEAVE CAT. CODE	
43 POSITION CONTROL CERTIFICATION		44 O P APPROVAL 10-17-73		45 STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS 1-YES 2-NONE		46 DATE APPROVED 10/17/72	

SECRET

(When Filled In)

EMPLOYEE NOTICE OF RESIGNATION

I RESIGN EFFECTIVE \_\_\_\_\_ (Date) FOR THE FOLLOWING REASON:

Oct 16 1951

MY LAST WORKING DAY WILL BE—

DATE SIGNED

SIGNATURE OF EMPLOYEE

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code)

INSTRUCTIONS

Items 1 thru 7 and Items 9 thru 18a — The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains *only* to the action requested, and *NOT* to the current status of the employee unless specific items remain unchanged.

Item 5 — "Category of Employment" should show one of the following entries:

Regular	Summer	WAE
Part Time	Detail Out	Consultant
Temporary	Detail In	Military
Temporary-Part Time		

Item 9 — "Organizational Designations" should show *all* levels of organization pertinent to identifying the location of the position:

FIRST  
PART

Major Component (Director, Deputy Director, etc.)  
Office, Major Staff, etc.  
Foreign Field or U.S. Field (if pertinent)  
Division or Staff (subordinate to first line)  
Branch  
Section  
Unit

Items 11 and 15 — "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or Form 261, Staffing Complement Change Authorization, explain under Item 18—Remarks.

Item 18b — Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, the *gaining Career Service* should approve and the other Career Service should concur in Item 18, Remarks.

ROUTING— The original only of this form will be forwarded to the Office of Personnel *through* the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1; which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.

SECRET

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(When Filled In)

7/25/72 REQUEST FOR PERSONNEL ACTION				DATE PREPARED 12 July 1972	
1. SERIAL NUMBER 057303		2. NAME (Last-First-Middle) GOODPASTURE, Ann L.			
3. NATURE OF PERSONNEL ACTION Reassignment - Transfer to			4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 07 23 72		5. CATEGORY OF EMPLOYMENT Regular
6. FUNDS XX		7. FINANCIAL ANALYSIS NO. CHARGEABLE 3227-0183		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP/CI Staff Development Complement			10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE Ops Officer			12. POSITION NUMBER 9997		13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		17. SALARY OR RATE 22,187 \$ 21,862	
16. GRADE AND STEP 13 87					
18. REMARKS FROM: Pos. No. 0073 NOTE: Subject will be on CIARDS Disability Retirement until 23 October 1973 cc: Finance CIA W/P ccs/ops					
19A. SIGNATURE OF REQUESTING OFFICIAL CI Staff			DATE SIGNED 7/12/72		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER 13 July 1972
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 16	20. EMPLOY CODE 18	21. OFFICE CODING NUMERIC ALPHABETIC 316971E	22. STATION CODE 75013	23. INTEGRAL CODE	24. MOVING CODE 1
25. DATE OF BIRTH MO. DA. YR. 11 28 18		26. DATE OF GRADE MO. DA. YR.		27. DATE OF LEI MO. DA. YR.	
28. NTE EXPIRES MO. DA. YR.		29. SPECIAL REFERENCE		30. RETIREMENT DATA CODE	
31. SEPARATION DATA CODE		32. CORRECTION, CANCELLATION DATA TYPE MO. DA. YR.		33. SECURITY REQ. NO.	
34. VET PREFERENCE CODE 1-NO PRE 2-10 YR		35. SERV COMP DATE MO. DA. YR.		36. LONG COMP DATE MO. DA. YR.	
37. CAREER CATEGORY CAR/RES PROV/TIMP		38. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		39. HEALTH INSURANCE HEALTH INS. CODE	
40. SOCIAL SECURITY NO.		41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT CODE	
43. POSITION CONTROL CERTIFICATION		44. O P APPROVAL		DATE APPROVED	

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING  
AND DECLASSIFICATION

(4)

SECRET

(When Filled In)

## EMPLOYEE NOTICE OF RESIGNATION

I RESIGN EFFECTIVE \_\_\_\_\_ FOR THE FOLLOWING REASON:

(Date)

JUL 26 JUL 19 3 33 PM '72

MY LAST WORKING DAY WILL BE—

DATE SIGNED

SIGNATURE OF EMPLOYEE

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code)

## INSTRUCTIONS

Items 1 thru 7 and Items 9 thru 18a — The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains *only* to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 — "Category of Employment" should show one of the following entries:

Regular

Summer

WAE

Part Time

Detail Out

Consultant

Temporary

Detail In

Military

Temporary-Part Time

Item 9 — "Organizational Designations" should show *all* levels of organization pertinent to identifying the location of the position:

FIRST LINE Major Component (Director, Deputy Director, etc.)

Office, Major Staff, etc.

Foreign Field or U.S. Field (if pertinent)

Division or Staff (subordinate to first line)

Branch

Section

Unit

Items 11 and 15 — "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or Form 261, Staffing Complement Change Authorization, explain under Item 18—Remarks.

Item 18b — Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, the *gaining* Career Service should approve and the other Career Service should concur in Item 18, Remarks.

ROUTING— The original only of this form will be forwarded to the Office of Personnel *through* the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1; which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.

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NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP					
		CHIEF, CONTROL DIVISION		SS NUMBER	
TO: (Check)		CHIEF, CONTRACT PERSONNEL DIVISION		EMPLOYEE NUMBER	
		CHIEF, OPERATING COMPONENT (For action)		ID CARD NUMBER	
ATTN:			OFFICIAL COVER	ESTABLISHED	
REF:				DISCONTINUED	
SUBJECT			UNIT		
KEEP ON TOP OF FILE WHILE COVER IN EFFECT					
ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS			CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS EFFECTIVE DATE:		
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE _____			SUBMIT FORM 3254 _____ W-2 TO BE ISSUED. (HNB 20-11)		
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR _____ TDY _____ OTHER (Specify) _____			SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)		
SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)			EAA: CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/>		
SUBMIT FORM 3254 _____ W-2 TO BE ISSUED. (HNB 20-11)			RETURN ALL OFFICIAL DOCUMENTATION TO CCS		
SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (NR 240-20)			SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD.		
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (NR 240-20)			DO NOT WRITE IN THIS BLOCK		
EAA. CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/>					
SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD					
REMARKS AND/OR COVER HISTORY					
DISTRIBUTION: COPY 1 - CC COPY 2 - OPERATING COMPONENT COPY 3 - O/OB COPY 4 - OL/TELEVC COPY 5 - OF COPY 6 - CCS - FILE			James H. Franklin  CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF		



#### EXPERIENCE

Employed by Central Intelligence Agency and World War II predecessor agencies from 1942 - 1972. Served as clerk, administrative assistant, photo technician, research analyst, and intelligence officer. Assignments were in Washington, D.C., the Far East, and Latin America.

SECRET  
(When Filled In)

CERTIFICATION OF SEPARATING EMPLOYEE

Name (Last-First-Middle)

GOODPASTER, ANN

MEMORANDUM FOR THE RECORD - ATTACH TO OFFICIAL PERSONNEL FOLDER

I hereby acknowledge the receipt of the following forms and/or information concerning my separation from CIA as indicated by check mark:

- |                                     |   |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | 1. Standard Form 8 (Notice to Federal Employee about Unemployment Compensation).  |
| <input type="checkbox"/>            | 2. Standard Form 55 (Notice of Conversion Privilege, Federal Employees' Group Life Insurance).  |
| <input type="checkbox"/>            | 3. Standard Form 56 (Agency Certification of Insurance Status, Federal Employers' Group Life Insurance Act of 1954).  |
| <input type="checkbox"/>            | 4. Standard Form 2802 (Application for Refund of Retirement Deductions).  |
| <input checked="" type="checkbox"/> | 5. Form 2595 (Authorization for Disposition of Paychecks).<br>CONTINUE DEPOSIT TO BANK  |
| <input type="checkbox"/>            | 6. Applicable to returnee (resignee from overseas assignment).<br>I have been advised of my right to have a medical examination before my separation from this Agency and of the importance of such a medical check to my health and well-being.<br><input type="checkbox"/> Appointment arranged with Office of Medical Services.<br><input type="checkbox"/> Appointment for Office of Medical Services examination declined. |
| <input type="checkbox"/>            | 7. I have been informed of "conflict of interests" policy of the Agency and foresee no problem in this regard concerning my new employment.   |
| <input type="checkbox"/>            | 8. Form 71 (Application for Leave).   |
| <input type="checkbox"/>            | 9. CSC Pamphlet 51 (Re-employment Rights of Federal Employees Performing Armed Forces Duty).  |
| <input type="checkbox"/>            | 10. Instructions for returning to duty from Extended Leave or Active Military Service.  |

Signature of Employee

Ann L. Goodpaster

Date Signed

7 June 72

Address (Street, City, State, Zip Code)

4200 CATHEDRAL AVE NW #412A

Correspondence

☒ Open

☐ Covert

WASH. D.C. 20016

SECRET

ADMINISTRATIVE  
INTERNAL USE ONLY

12 JUN 1972

MEMORANDUM FOR : Miss Ann L. Goodpasture

THROUGH : Head of CS Career Service

SUBJECT : Notification of Approval of Disability  
Retirement

1. This is to inform you that the Director of Personnel has approved your request for disability retirement under the CIA Retirement and Disability System. On the basis of medical evidence, the Director of Personnel has determined that your disability is of a permanent nature; therefore, no further medical review of your case will be required.

2. Your retirement will become effective 23 October 1973, the expiration date of your accrued sick leave and excess annual leave. You may be assured that every effort will be made to expedite delivery of your first check following completion of the administrative details required to effect your retirement.

/s/ B. DeFelice  
B. DeFelice  
Deputy Director of Personnel  
for Special Programs

Distribution:

- 0 - Addressee
- 1 - OMS
- 1 - CS Career Service
- 1 - D/Pers
- 1 - OPF
- 1 - ROB Soft File
- 1 - ROB Reader

OP/RAD/ROB/WFMadigan:jat/3257 (10 JUN 1972)

ADMINISTRATIVE  
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CONFIDENTIAL

5 JUN 1972

**MEMORANDUM FOR THE RECORD**

**SUBJECT : Request for Disability Retirement Under the  
Provisions of the CIA Retirement and Disability  
System - Miss Ann L. Goodpasture**

Based upon my review and evaluation of the evidence listed below, I hereby approve the request of Miss Ann L. Goodpasture for disability retirement under the provisions of the CIA Retirement and Disability System and, on the basis of the medical evidence submitted in this case, I have determined that the disability of Miss Goodpasture is permanent:

a. Supervisor's statement dated 14 March 1972 submitted in accordance with the provisions of paragraph h. (3) of HR 20-50.

b. Written report of the Board of Medical Examiners dated 25 May 1972 as submitted by the Chairman of that Board in accordance with the provisions of paragraph h. (4)(c) of HR 20-50.

/s/Harry B. Fisher

**Harry B. Fisher  
Director of Personnel**

**Distribution:**

- 0 - Return to ROB
- 1 - D/Pers
- 1 - OPF
- 1 - ROB Soft File
- 1 - ROB Reader

OP/RAD/ROB/WFMadigan:jat/3257 (31 May 1972)

CONFIDENTIAL

**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>				DATE PREPARED <b>23 June 1970</b>	
1. SERIAL NUMBER <b>057303</b>		2. NAME (Last-First-Middle) <b>GOODPASTURE, ANN L.</b>			
3. NATURE OF PERSONNEL ACTION <b>Reassignment</b>			4. EFFECTIVE DATE REQUESTED MONTH <b>10</b> DAY <b>15</b> YEAR <b>70</b>		5. CATEGORY OF EMPLOYMENT <b>Regular</b>
6. FUNDS <input checked="" type="checkbox"/> V TO V <input type="checkbox"/> V TO CF <input type="checkbox"/> CF TO V <input type="checkbox"/> CF TO CF		7. FINANCIAL ANALYSIS NO CHARGEABLE <b>12147-0170</b> <b>0003-0170</b>		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS <b>DDP/CI Staff Operations Group WE Branch</b>			10. LOCATION OF OFFICIAL STATION <b>Washington, D.C.</b>		
11. POSITION TITLE <b>Ops Officer</b>		12. POSITION NUMBER <b>0073</b>		13. CAREER SERVICE DESIGNATION <b>D</b>	
14. CLASSIFICATION SCHEDULE (GS, E.B., etc.) <b>GS</b>		15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>13 6</b>	
17. SALARY OR RATE <b>\$ 19,555</b>		18. REMARKS <b>FROM: DDP/NH/Dev. Comp/Pos. No. 9997</b>  <b>Coordination: <u>Henry L. Berthold</u> C/NH/Personnel</b>  <b>CC: Finance and Security</b> <b>Home Base: WH</b>  <b>Security Approval Granted by Pers. SO/OS/430</b> <b>DB 10121</b>			
18A. SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i> <b>CI STAFF</b>		DATE SIGNED <b>6-23-70</b>		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE <b>37</b>	20. EMPLOY CODE <b>10</b>	21. OFFICE CODING NUMERIC <b>31400</b> ALPHABETIC <b>CI</b>	22. STATION CODE <b>15013</b>	23. INTEGREE CODE <b>1</b>	24. HQ/RTS CODE <b>1132112</b>
25. DATE OF BIRTH MO. DA. YR.	26. DATE OF GRADE MO. DA. YR.	27. DATE OF LEI MO. DA. YR.	28. DATE EXPIRES MO. DA. YR.	29. SPECIAL REFERENCE 1-ESC 2-ORCA 3-FICA 4-NCSE	30. RETIREMENT DATA CODE
31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA TYPE MO. DA. YR.	33. SECURITY REQ NO		34. SEX	
35. VET PREFERENCE CODE 0-NONE 1-1 PT 2-10 PT	36. SERV COMP DATE MO. DA. YR.	37. LONG COMP DATE MO. DA. YR.	38. CAREER CATEGORY CAR/RES PROV. TEMP	39. PEGU: HEALTH INSURANCE CODE CODE 0-WAIVER 1-YES	40. SOCIAL SECURITY NO
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO DELAY IN SERVICE 2-DELAY IN SERVICE (LESS THAN 3 YEARS) 3-DELAY IN SERVICE (MORE THAN 3 YEARS)		42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS		44. STATE TAX DATA FORM EXECUTED CODE NO. TAX EXEMPTIONS
45. POSITION CONTROL CERTIFICATION <b>19-14-70</b>			46. OP APPROVAL <i>[Signature]</i>		DATE APPROVED <b>10-20-70</b>

MAR 1972

**MEMORANDUM FOR : Chairman, Board of Medical Examiners**

**SUBJECT : Request for Medical Evaluation -  
Miss Ann L. Goodpasture**

1. Miss Ann L. Goodpasture, a participant in the CIA Retirement and Disability System, has applied for disability retirement under the provisions of Section 231 of Public Law 88-643, Central Intelligence Agency Retirement Act of 1964 for Certain Employees. It is requested that a medical examination be arranged for Miss Goodpasture and that a written report of the Board of Medical Examiners as prescribed in paragraph h (4) of HR 20-50 be submitted to this office.

2. Miss Goodpasture plans to remain on duty pending a decision on her application for retirement.

3. Attached is a copy of the Supervisor's Statement, a copy of the Application for Disability Retirement, and a private physician's statement.

**Harry B. Fisher  
Director of Personnel**

**Attachments:**

- a. Supervisor's Statement
- b. Application
- c. Private Physician's Statement

**Distribution:**

- 0 & 1 - Addressee
- 1 - D/Pers
- 1 - OPF
- 1 - ROB Soft File
- 1 - ROB Reader

OP/RAD/ROB/W ladigan:jat/3257 (28 March 1972)

ADMINISTRATIVE  
INTERNAL USE ONLY

8 MAR 1972

MEMORANDUM FOR : Miss Ann L. Goodpasture  
THROUGH : Administrative Officer, CI Staff  
SUBJECT : Application to Purchase Service Credit

1. This is to advise you that your application to purchase service credit under the CIA Retirement and Disability System has been processed. The period of your service which is not covered by retirement deductions and the amount due to cover this period are as follows:

<u>Redeposit Period</u>	<u>Total Amount Due</u>
11 Mar 1942 - 8 Sep 1943	\$241.00

2. Postponing payment will cause the amount due to increase because of additional interest at the rate of 3 per cent compounded annually. However, so long as the amount is not paid, you have the use of this money for other purposes. You may postpone payment until you retire.

3. If the redeposit is not made you will receive no credit in the computation of annuity for the period of service covered by the refund. This usually results in a sharp reduction in the amount of your annuity.

4. If you wish to make payment for the redeposit period, please make your check payable to the Treasurer of the United States and forward it to the Chief, Retirement Operations Branch, 205 Magazine Building. If you prefer, you may make installment payments or arrange for bi-weekly payroll allotments of \$25.00 or multiples thereof. A receipt showing a statement of your account will be sent to you acknowledging each installment payment.

FOR THE DIRECTOR OF PERSONNEL

RONALD GAGE

Ronald Gage  
Acting Chief, Retirement Affairs Division

Distribution:

0 - Addressee  
1 - D/Pers  
1 - OPE  
1 - ROB Soft File  
1 - ROB Reader

OP/RAD/ROB/WFMA :ansjat/3257 (7 March 1972)

ADMINISTRATIVE  
INTERNAL USE ONLY

SECRET

(If Not Filled In)

DATE PREPARED

## REQUEST FOR PERSONNEL ACTION

18 NOVEMBER 1968

1. SERIAL NUMBER 057303		2. NAME (Last-First-Middle) GOODPASTURE, ANN L.	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE REQUESTED MONTH 12 DAY 01 YEAR 68	
5. CATEGORY OF EMPLOYMENT REGULAR		6. FINANCIAL ANALYSIS NO. CHARGEABLE 9135 0623	
7. FUNDS V TO V CF TO V		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP/WH DEVELOPMENT COMPLEMENT		10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 9997	
13. CAREER SERVICE DESIGNATION D		14. CLASSIFICATION SCHEDULE (GS, E.B., etc.) GS	
15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 13 6	
17. SALARY OR RATE \$ 16809		18. REMARKS FROM: DDP/WH/FOREIGN FIELD/BRANCH 1/MEXICO CITY/POS.# 0418 1 - Finance Pending Reassignment to 6 NOV 1968 Demotion to 565. Summary has been granted for request ST/SPS 31 NOV 68	
19. SIGNATURE OF REQUESTING OFFICIAL Henry L. Berthold C/WH/Personnel		20. DATE SIGNED 14 Nov 68	
21. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		22. DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
23. ACTION CODE 157	24. EMPLOY CODE 18	25. OFFICE CODING NUMERIC 51277 ALPHABETIC LCH	26. STATION CODE 25013
27. DATE OF BIRTH MO DA YR 11 28 68	28. DATE OF GRADE MO DA YR	29. DATE OF LET MO DA YR	30. DATE OF RETIREMENT MO DA YR
31. INT. EXPIRES MO DA YR	32. SPECIAL REFERENCE 1-ESC 2-ORCH 3-FICA 4-MORT	33. RETIREMENT DATA CODE	34. SEPARATION DATA CODE
35. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CAP BSW PROG, TEMP
39. FEDERAL HEALTH INSURANCE CODE 0-NONE 1-YES	40. SOCIAL SECURITY NO.	41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NONE 2-BELIE IN SERVICE (LESS THAN 3 YEARS) 3-BELIE IN SERVICE (MORE THAN 3 YEARS)	42. LEAVE CAT CODE
43. POSITION CONTROL CERTIFICATION	44. FEDERAL TAX DATA FORM EXECUTED 1-YES 2-NONE	45. STATE TAX DATA FORM EXECUTED 1-YES 2-NONE	46. OP APPROVAL 11-21-68 J.P. [Signature]
47. DATE APPROVED 11-25-68		48. DATE APPROVED	

FORM 1152 USE PREVIOUS EDITION

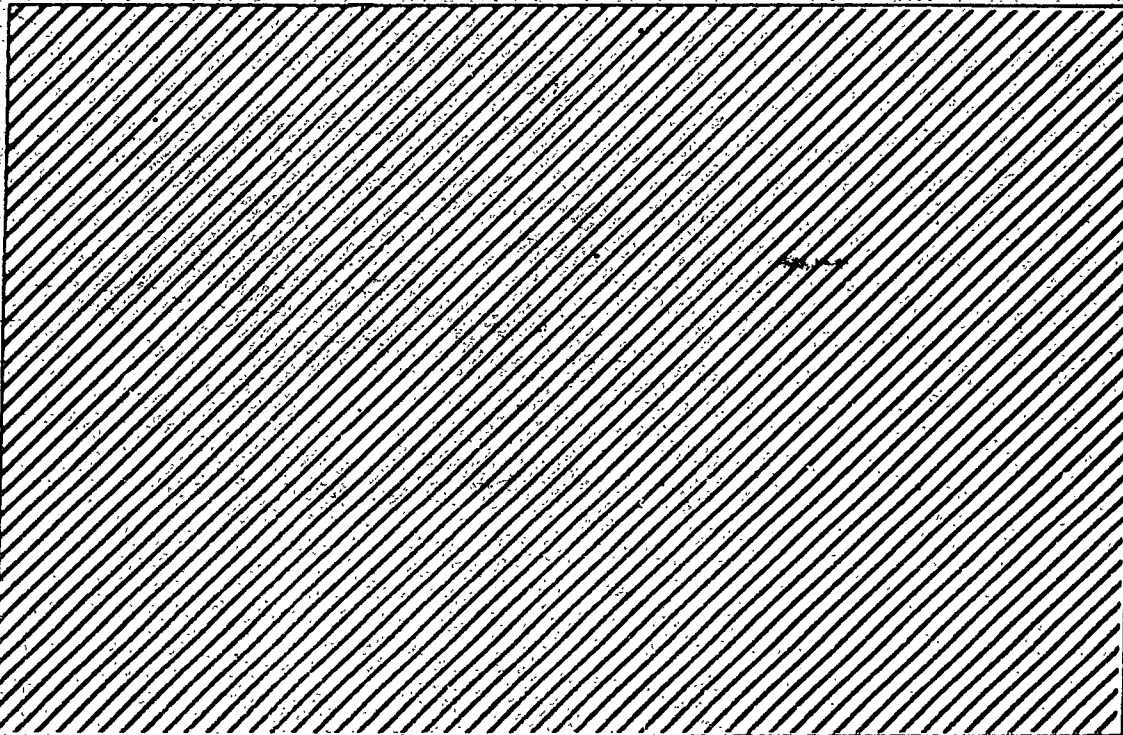
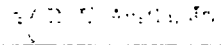
SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING  
AND DECLASSIFICATION

(4)



SECRET  
(When Filled In)

		
NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
Goodpasture, Ann	Self	69-0577
<p>There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>13 September 1968</u></p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF BSD REPRESENTATIVE	
24 January 1969		
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		
NAME OF EMPLOYEE (use pseudo only if SA)	DATE (from item 5-D)	NAME OF SUPERVISOR (true)	DATE (from item 5-2)	
Ann L. Goodpasture	4/24/67	Winston Scott	4/24/67	
DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:		
5/4/67	HMMT-7821			
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
28 Nov 1918		GS-13 Ops Officer	Mexico City	LNGOLD
6a. DATE OF PCS ARRIVAL IN FIELD	6b. REQUESTED DATE OF DEPARTURE	6c. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6d. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
5 May 1957	1 Sept 1967	10 Sept 1967	31 October 1967	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:				
None				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:				
None				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-F 240-8)				
<p>Case Officer for operational support and liaison projects sponsored by high-level contacts of COS.</p> <p>Liaison with other agencies on CE cases.</p> <p>Special projects assigned by COS</p>				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				
None				

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT

11A. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

CE/CI Officer for Mexico Station

11B. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, & 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

- ☐ EXTEND TOUR \_\_\_\_\_ MONTHS AT CURRENT STATION TO \_\_\_\_\_ (DATE)
- ☐ BE ASSIGNED TO HQTRS FOR A TOUR OF DUTY: INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.  
1ST CHOICE \_\_\_\_\_ 2ND CHOICE \_\_\_\_\_ 3RD CHOICE \_\_\_\_\_
- ☐ BE ASSIGNED TO ANOTHER FIELD STATION: INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION  
1ST CHOICE \_\_\_\_\_ 2ND CHOICE \_\_\_\_\_ 3RD CHOICE \_\_\_\_\_
- ☒ RETURN TO MY CURRENT STATION

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

Chief of Station, Mexico City strongly recommends that this officer be allowed to return to Mexico City for another tour after home leave.

This officer is a very important and essential member of the Mexico City Station Staff; and this officer's services are need very much by this Station.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

WH Division recommends that Miss Goodpasture be approved for another tour in Mexico City.

DATE 3/17 TITLE C/WH/Pers SIGNATURE Robert D. Cashman

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

Returned second tour

15. EMPLOYEE NOTIFIED BY DISPATCH NO. H01612-2210 DATED: 29 May 67

CABLE NO. \_\_\_\_\_ DATED: \_\_\_\_\_

CAREER SERVICE REPRESENTATIVE: \_\_\_\_\_ (SIGNATURE)

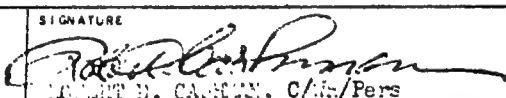
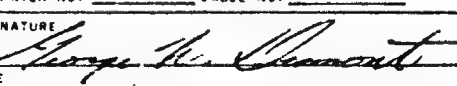
DATE 29 May 1967

SECRET

SECRET


Received in  
CSMO 28 May 63

FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY	
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:			
NAME OF EMPLOYEE (true)	DATE (from item 1)	NAME OF SUPERVISOR (true)	DATE (from item 2)
Ann L. GONPAST	18 June 1963	Clinton H. Scott	18 June 1963
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:		DATE	
R. Farina, WH/Personnel		28 August 1963	
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE	
28 November 1918	GS-13	Operations Officer - CE	
4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE	7. EXPECTED RATE OF DEPARTURE FROM FIELD	
	Mexico City		
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR		78. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS	
None			
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):			
<ol style="list-style-type: none"> <li>1. Liaison with the Legal Attache. (requests for traces and investigations).</li> <li>2. Case Officer for miscellaneous CE operations such as short term physical or technical surveillances.</li> <li>3. Alternate contact with [redacted] Inside officer responsible for processing take from three anti-Soviet photo surveillance bases.</li> <li>4. Alternate for station photographer, flaps and seals.</li> <li>5. Prepares briefing papers and other materials used by COS for special briefing of representatives from Headquarters or other U.S. Government and private agencies.</li> <li>6. Case Officer handling [redacted] who supervises the intercept center for a semi-official telephone tap operation covering 30 lines simultaneously.</li> </ol>			
9. PREFERENCE FOR NEXT ASSIGNMENT:			
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 3, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.			
8. (continued)			
<ol style="list-style-type: none"> <li>7. Alternate contact for [redacted] who supervises a semi-official support project.</li> <li>8. Pending assignment additional SR ops officer, case officer for [redacted] unilateral outside translator.</li> </ol>			
9. For next assignment, have no particular preference.			
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):			
To be determined by Headquarters or Chief of Station, based on next assignment.			

FORM 1451 RECORD OF OVERSEAS SERVICE	NAME OF EMPLOYEE	EMPLOYEE SERIAL NO.	COMPLETED BY EMPLOYEE		TELEPHONE EXT.	SECRET (WHEN FILLED IN)	
			YES	NO			
	DO NOT FOLD, STAPLE, SPINDLE, OR MUTILATE						
	INSTRUCTIONS	DO NOT WRITE IN COLUMN	WHERE SERVICE WAS PERFORMED	PERIOD OF SERVICE	DATES	SERVICE AS	RESPONSIBILITY
THIS FORM MUST BE RETURNED WHETHER YOU HAVE HAD OVER- SEAS SERVICE OR NOT. PLEASE READ CAREFULLY IN- STRUCTIONS ON ACCOMPANYING CARD, THEN FILL OUT THIS FORM AS ACCURATELY AS POSSIBLE				FROM TO MO. YR. MO. YR. 02 34 03 31 01 34 30 00	CIVILIAN 1 MILITARY 2 OTHER 3	U.S. GOVT. DEPT. OR AGENCY	
		330 India/Ceylon	1	08 47 08 75	1	CTA	100
		145 China	1	08 46 03 46	1	"	100
		330 India	1	02 47 12 48	1	"	100
		450 Mexico	1	07 51 10 53	1	"	100
		300 Guatemala	2	04 54 05 54	1	"	100
		450 Mexico	1	05 57 07 58	1	"	100
IF ADDITIONAL SPACE IS NEEDED, CHECK HERE <input type="checkbox"/> AND ASK YOUR ADMINISTRATIVE OFFICER FOR SUPPLEMENTAL CARDS							
TO BE COMPLETED BY SUPERVISOR AT FIELD STATION							
13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:							
14. SIGNATURE: COMPLETE ITEM NO. 9-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM.							
TO BE COMPLETED BY APPROPRIATE PERSONNEL OFFICER AT HEADQUARTERS							
15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:							
WH Division recommends that Subject return to Mexico City for another  tour of duty.							
16. NAME OF PERSONNEL OFFICER ROBERT D. Cashman DATE 26 August 1963				SIGNATURE  ROBERT D. CASHMAN, C/As/Pers			
FOR USE OF CAREER SERVICE							
17. EMPLOYEE REASSIGNMENT <input checked="" type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN NOTIFIED OF PLANNED				18. REFERENCE DISPATCH NO. 20 Sep 63 CABLE NO.			
19. TYPED OR PRINTED NAME George W. Demont				20. SIGNATURE 			
21. TITLE Personnel Officer/CSPO				22. DATE 20 Sep 63			
23. COMMENTS CS Personnel Management Committee approved retention of Miss Goodpasture at Mexico City through January 1965, followed by return to Hq, PCS.							

SECRET

SECRET

FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY	
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7, BELOW:			
NAME OF EMPLOYEE (true)	DATE (from item 1-2)	NAME OF SUPERVISOR (true)	DATE (from item 1-2)
GOODPASTURE, Ann L.	24 Jan 61	Winston M. Scott	24 Jan 61
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7, BELOW:			DATE
 A. Washinko, HH/Pers Ofc			3 Feb 61
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE	
28 November 1918	GS-12	Intelligence Officer	
4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE		7A. EXPECTED DATE OF DEPARTURE FROM FIELD
KUTUBE	Mexico City		August 1961
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR			7B. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS
None			
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):			
<p>Case Officer - CE Operations. Operational support for five anti-soviet, CE, support-type and technical projects. Flaps and seals, and photo for special projects when other techs not available. Other duties assigned by OOS.</p>			
9. PREFERENCE FOR NEXT ASSIGNMENT:			
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 8, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.			
<p>Continuation of above.</p>			
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):			
<p>Believe no additional training needed unless decided change in duties.</p>			

SECRET

SECRET

D. PREFERENCE FOR NEXT ASSIGNMENT (continued)	
C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choice) IN THE BOXES BELOW:	
<input type="checkbox"/> RETURN TO MY CURRENT STATION. <input checked="" type="checkbox"/> BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY. WITH RESPECT TO POSSIBLE ASSIGNMENT IN HEADQUARTERS, INDICATE CHOICE OF COMPONENT: 1ST. CHOICE <u>WH</u> 2ND. CHOICE _____ 3RD. CHOICE _____ <input checked="" type="checkbox"/> BE ASSIGNED TO ANOTHER FIELD STATION. WITH RESPECT TO POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIFIC STATION, BASED ON QUALIFICATIONS: 1ST. CHOICE <u>WH</u> 2ND. CHOICE <u>WH</u> 3RD. CHOICE <u>WH</u>	
10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS? INDICATE NUMBER OF WORK DAYS <u>45</u>	
11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:  None	
12. SIGNATURE: COMPLETE ITEM NO. 5-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM. TO BE COMPLETED BY SUPERVISOR AT FIELD STATION	
13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:  It is strongly urged by COS that this extremely valuable and all-round officer be returned to the Mexico City Station.  RIGGS would be one of the most difficult persons to replace in the Mexico City Station because of the variety of types of work he does (and all well and efficiently) and because of his detailed knowledge of CE operations, Soviet personalities and targets, and general capabilities.	
14. SIGNATURE: COMPLETE ITEM NO. 5-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM. TO BE COMPLETED BY APPROPRIATE PERSONNEL OFFICER AT HEADQUARTERS	
15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:  Concur in COS recommendation  28 FEB 1961 Ann L. HUNNIS - 1755	
16. NAME OF PERSONNEL OFFICER  P.C. BOWERS, DATE 3 Feb 61	SIGNATURE  <i>P.C. Bowers</i>
FOR USE OF CAREER SERVICE	
17. EMPLOYEE <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN NOTIFIED OF PLANNED REASSIGNMENT	18. REFERENCE DISPATCH NO. _____ CABLE NO. _____
19. TYPED OR PRINTED NAME	20. SIGNATURE
21. TITLE	22. DATE
23. COMMENTS	

SECRET

DISPATCH

CLASSIFICATION

SECRET/RYBAT

PROCESSING ACTION

MARKED FOR INDEXING

XX

NO INDEXING REQUIRED

ONLY QUALIFIED DESK

CAN JUDGE INDEXING

MICROFILM

Chief, WH Division

INFO

FROM

Chief of Station, Mexico City

SUBJECT

Recommendation for Promotion -- ~~XXXXXXXXXX~~

ACTION REQUIRED - REFERENCES

Reference: A. HMMT-7514  
B. HMMT-6090

Action : See paragraph 1.

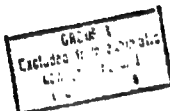
1. It is strongly recommended that ~~XXXXXXXXXX~~ be promoted to GS-14.

2. This officer has performed outstandingly at this Station for many years; he is a dedicated hard-working employee who is conscientious about and careful with WOFACT funds. This officer has for years been involved in managerial capacities in some of the most sensitive and highly successful operations run by this Station -- one of which has been cited by Headquarters as a model of its type and the most successfully productive (technical) operation in WOFACT.

3. ~~XXXX~~ is an officer of outstanding capabilities of a wide range and variety.

4. All these attributes, performance, time in grade, and service time with WOFACT should combine to cause the promotion of this deserving officer.

*Willard C. Curtis*  
Willard C. CURTIS



Distributions:

✓ 3 - WH

REFERENCE TO

DISPATCH SYMBOL AND NUMBER

DATE

HMMT-7559

8 February 1967

CLASSIFICATION

FILE NUMBER

SECRET/RYBAT



DISPATCH		CLASSIFICATION	PROCESSING ACTION
TO: Chief, WH Division		SECRET/RYBAT	MARKED FOR INDEXING
INFO:			XX NO INDEXING REQUIRED
FROM: Chief of Station, Mexico City			ONLY QUALIFIED DESK CAN JUDGE INDEXING
SUBJECT: Recommendations for Promotion			MICROFILM
ACTION REQUIRED - REFERENCES			
<p>Reference: A. WH Field Memorandum No. 2072, 28 January 1966            B. CSI-F-20-18, 5 May 1961            C. HMMT-7514, 24 January 1967            D. HMMT-7558, 8 February 1967</p> <p>1. COS, Mexico City, has recommended that both <i>Ann Goodpasture</i> and <i>Benjamin Peppert</i> of this Station be considered for promotion from GS-13 to GS-14 (references C and D).</p> <p>2. These two officers are ranked in the following order in the Station's recommendations for promotion:</p> <p>a. <i>Ann Goodpasture</i>            b. <i>Benjamin Peppert</i></p> <p><i>Willard C. Curtis</i>            WILLARD C. CURTIS</p>			
Distribution: 3 - WH			
REFERENCE TO	DISPATCH SYMBOL AND NUMBER	DATE	
	HMMT-7617	27 February 1967	
CLASSIFICATION		FILE NUMBER	
SECRET/RYBAT			

SECRET  
(When Filled In)

23 February 1966

*Mr. L. Goodpasture*

MEMORANDUM FOR: ~~██████████~~

THROUGH : Chief of Station, Mexico City

SUBJECT : Notification of Designation as a Participant in the Organization Retirement and Disability System

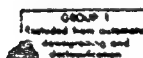
REFERENCE : Book Dispatch 5096, dated 12 August 1965

Recent correspondence on the above subject informed you that I had determined that you met the criteria specified in the applicable regulation for designation as a participant in the Organization Retirement and Disability System. On the basis of this determination and your recently executed election to remain in the System, your designation as a participant was made effective 13 February 1966.

*Richard B. Egan*

RICHARD B. EGAN

SECRET



SECRET

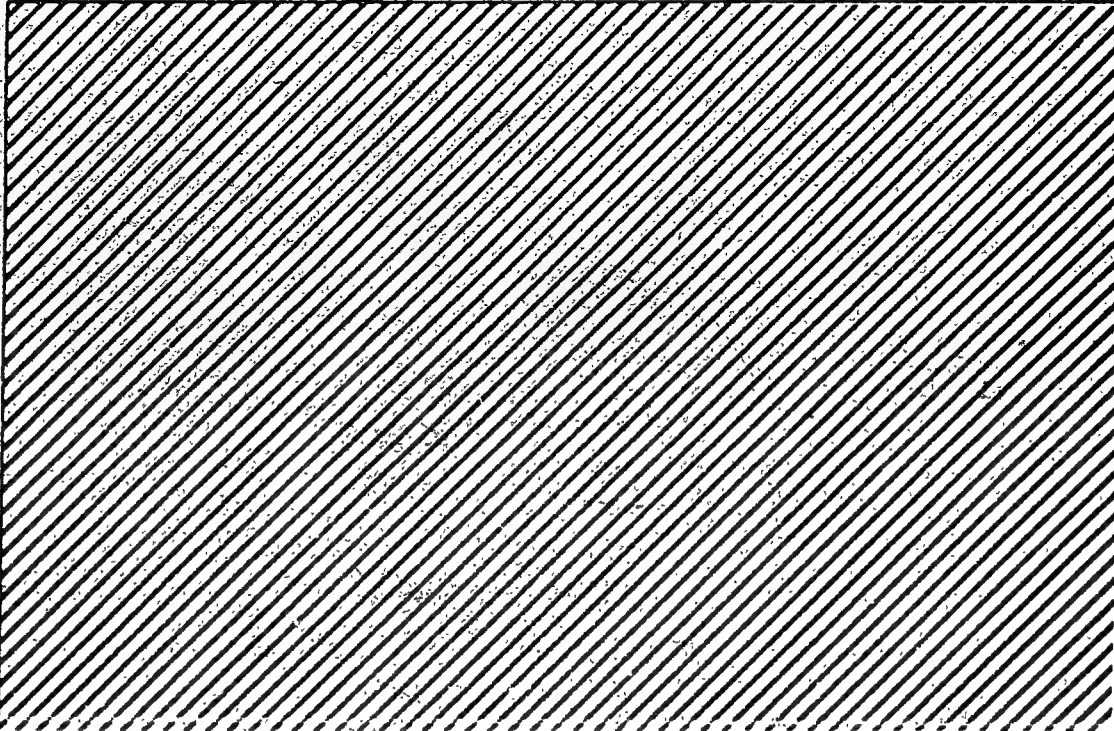

G 42

(If Not Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SERIAL NUMBER 057303						18 January 1966	
2. NAME (Last-First-Middle) GOONPASTURE, ANN L.							
3. NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM						4. EFFECTIVE DATE REQUESTED MONTHS DAY YEAR 02 13 66	
5. CATEGORY OF EMPLOYMENT REGULAR							
6. FUNDS V TO V C TO V X C TO C						7. COST CENTER-NO CHARGE ABLE 6135-0990	
8. LEGAL AUTHORITY (Complied by Office of Personnel) PL 88-643 Sect. 203							
9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH I MEXICO CITY, MEXICO STATION						10. LOCATION OF OFFICIAL STATION MEXICO CITY, MEXICO	
11. POSITION TITLE OPS OFFICER						12. POSITION NUMBER 0418	
13. CAREER SERVICE DESIGNATION D							
14. CLASSIFICATION SCHEDULE (GS, I.B., etc.) GS						15. OCCUPATIONAL SERIES 0136.01	
16. GRADE AND STEP 13 4						17. SALARY OR RATE \$13,815	
18. REMARKS EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION <del>AND FROM THE DIRECTOR OF PERSONNEL OF THIS</del>							
18A. SIGNATURE OF REQUESTING OFFICIAL Philip C. Bonera				DATE SIGNED 17 JAN 66		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	
DATE SIGNED							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 28	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 511620 WH 45273	22. STATION CODE 45273	23. INTEGRITY CODE	24. HOOIES CODE 3	25. DATE OF BIRTH MO. DA. YR 11 28 18	26. DATE OF GRADE MO. DA. YR 11 11 62
27. DATE OF LEI MO. DA. YR 11 08 64	28. NTE EXPIRES MO. DA. YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1-CSC 2-FICA 3-NONE 2	31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA TYPE MO. DA. YR	33. SECURITY REQ NO	34. SEX
35. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	36. SERV COMP DATE MO. DA. YR	37. LONG COMP DATE MO. DA. YR	38. CAREER CATEGORY CAR/RESU PROV TEMP	39. FEDERAL HEALTH INSURANCE CODE 0-WAIVER 1-YES	40. SOCIAL SECURITY NO		
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42. LEAVE CAT. CODE	43. FEDERAL TAX DATA FORM EXECUTED 1-YES 2-NO	44. STATE TAX DATA FORM EXECUTED 1-YES 2-NO	
45. POSITION CONTROL CERTIFICATION 01-21-66 H				46. OP APPROVAL R. B. Bonera Jr. 20 Jan 66		DATE APPROVED	

SECRET

SECRET  
(When Filled In)

		
NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT	CLAIM NUMBER
Goodpasture, Ann L.	Self	66-691
<p>There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>29 December 1965</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF GPO REPRESENTATIVE	
14 FEB 1966		
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED <b>31 OCTOBER 1962</b>	
1. SERIAL NUMBER <b>057303</b>		2. NAME (Last-First-Middle) <b>GOODPASTURE, ANN L.</b>					
3. NATURE OF PERSONNEL ACTION <b>PROMOTION</b>				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>11 11 62</b>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>	
6. FUNDS V TO V CF TO V		V TO CF CF TO CF		7. COST CENTER NO. CHARGEABLE <b>3135 5700 1000</b>		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS <b>DDP WH BRANCH 3 MEXICO CITY, MEXICO STATION</b>				10. LOCATION OF OFFICIAL STATION <b>MEXICO CITY, MEXICO</b>			
11. POSITION TITLE <b>OPS OFFICER</b> <del>INTELLIGENCE OPERATOR</del>				12. POSITION NUMBER <b>852</b> <del>014-100</del>		13. CAREER SERVICE DESIGNATION <b>D</b>	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) <b>GS</b>		15. OCCUPATIONAL SERIES <b>0134.01</b> <del>0135.01</del>		16. GRADE AND STEP <b>13 2</b>		17. SALARY OR RATE <b>\$ 11,515</b>	
18. REMARKS <b>FROM: SAME</b>							
19. SIGNATURE OF REQUESTING OFFICIAL <i>C. Bowers</i> <b>C. BOWERS C/WH/Personnel</b>				DATE SIGNED <b>10/31/62</b>		19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>	
				DATE SIGNED <b>11/9/62</b>			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE <b>22</b>	20. EMPLOY CODE <b>10</b>	21. OFFICE CODE NUMERIC ALPHABETIC <b>64700 WH</b>		22. STATION CODE <b>45075</b>	23. INTEREST CODE <b>3</b>	24. MONTHS <b>3</b>	25. DATE OF BIRTH MO. DA. YR. <b>11 28 18</b>
26. DATE OF GRADE MO. DA. YR.	27. DATE OF LET MO. DA. YR.	28. RETIREMENT DATA 1 - CSC 3 - FICA 5 - NONE COLF		29. SEPARATION DATA CODE TYPE MO. DA. YR.	30. CORRECTION/CANCELLATION DATA EOD DATA		31. SECURITY REQ. NO.
32. VET. PREFERENCE CODE 0 - NO. 1 1 - 5 YR. 2 - 10 YR.	33. SERV. COMP. DATE MO. DA. YR.	34. ONG. COMP. DATE MO. DA. YR.	35. CAREER CATEGORY CAR/RESV PROV/TEMP	36. REG. / HEALTH INSURANCE CODE 0 - WAIVED 1 - YES	37. SOCIAL SECURITY NO.		
38. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)		39. LITRE CAT. CODE	40. FEDERAL TAX DATA FORM EXECUTED CODE 1 - YES 2 - NO		41. STATE TAX DATA FORM EXECUTED CODE 1 - YES 2 - NO		
42. POSITION CONTROL CERTIFICATION <i>[Signature]</i> <b>11/1/62</b>				43. O.P. APPROVAL <i>[Signature]</i>		DATE APPR <b>11/9</b>	

FORM 1152 OBSOLETE PREVIOUS EDITION AND FORM 1152a

**SECRET**

GROUP 1  
EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

MEMORANDUM FOR: Secretary, CS/CS Panel (Section A)  
SUBJECT: Recommendation for Promotion to Grade GS-13  
Miss Ann L. Goodpasture

1. Miss Ann L. Goodpasture has been in Mexico City for five years and during this period has functioned as a Case Officer supporting operations against Soviet and Satellite targets. She was recommended for promotion in February 1961 and September 1961.
2. Miss Goodpasture is a seasoned and able employee who excels in the field of CE analysis. Her diligence, imagination, and experience have made her indispensable to the Station, which processes a great mass of information on Soviet and Satellite CE targets. Her knowledge of this field is encyclopedic, and the profundity of her analyses is equal to any occasion. She is a steady, cheerful worker who has the respect and affection of all her colleagues. She does her job without assistance and she is always willing to help with special Station projects.
3. It is recommended that Miss Goodpasture be promoted to GS-13.

*R. W. Heybert*  
J. C. KING  
Chief

Western Hemisphere Division

SECRET

SECRET

15 September 1961

MEMORANDUM FOR: Secretary, CS/CS Panel (Section B)

SUBJECT: Recommendation for Promotion to Grade GS-13 -  
Miss Ann L. Goodpasture

1. Miss Ann L. Goodpasture has been assigned to the Mexico City Station since early 1957 as a Case Officer in support of CI/CE operations directed against Soviet targets in Mexico. The Chief of Station recommended Miss Goodpasture for promotion in February of 1961.

2. Miss Goodpasture is a highly competent employee who has shown great strength in performing operational tasks which require a high degree of analytical ability, patience, and initiative. She is particularly strong in the CI/CE field and has made an invaluable contribution to the Mexico City Station's program directed against personnel of the Soviet Embassy and other individuals believed to be engaged in Soviet Bloc espionage activities. Miss Goodpasture is highly motivated, performs all her assignments with great dispatch in a most professional manner, and does have the qualifications found in more senior Case Officers.

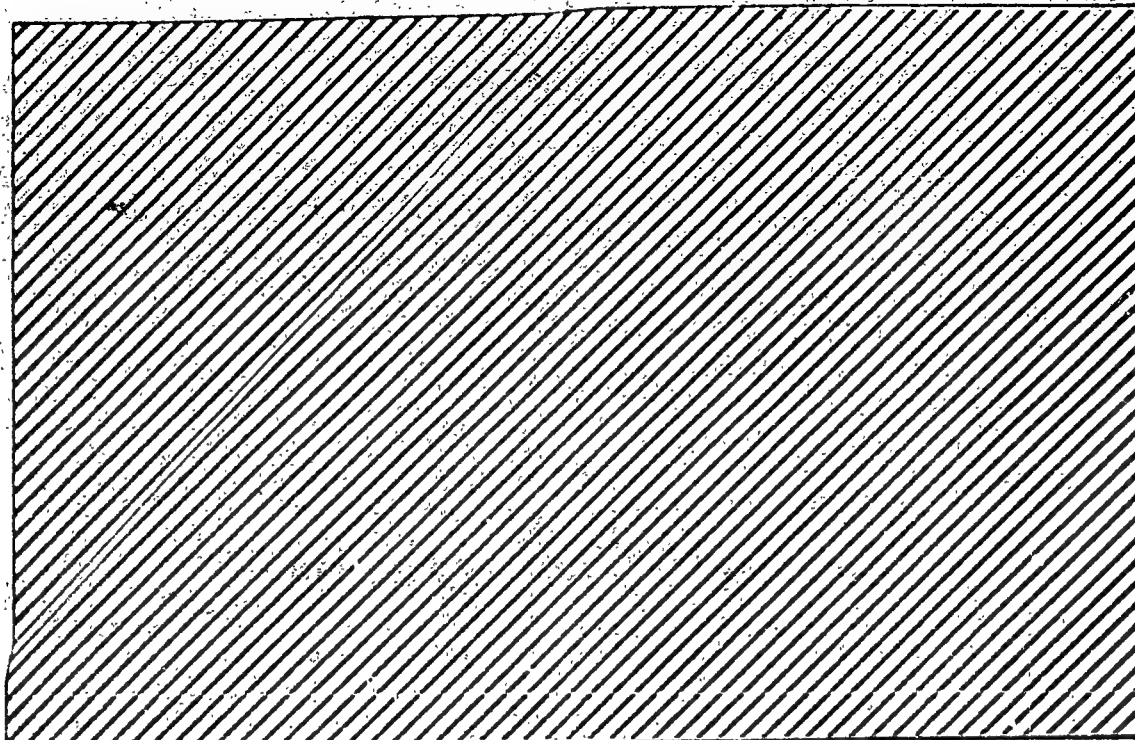
3. It is recommended that Miss Goodpasture be promoted to grade GS-13.

J. C. KING  
Chief,

Western Hemisphere Division

*Approved*  
*Nov 1962*

SECRET

SECRET  
(When Filled In)

NAME OF EMPLOYEE (LAST-FIRST-MIDDLE)	DATE OF BIRTH	CASE OR CLAIM NUMBER
COFFASUPE, Ann	Unk	58-1100
<p>There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee for an illness, injury, or death incurred on <u>12 May 58</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF BCO REPRESENTATIVE	
24 Sep 58	<i>B. D. Felice</i>	

NOTICE OF OFFICIAL DISABILITY CLAIM FILE



15 February 1957

Baskin and Company, Real Estate  
724 - 9th Street, N. W.  
Washington, D. C.

Gentlemen:

At the request of Miss Ann Goodpasture, we are writing to confirm the fact that on or about 1 March 1957, Miss Goodpasture will be transferred to a location away from the Washington, D. C., area for the convenience of the Government.

Any consideration you may give Miss Goodpasture with regard to the termination of the lease she holds with your company will be appreciated.

Very truly yours,

G. M. Stewart  
Director of Personnel

OP/CS/av(Counseling)

SECRET

STANDARD FORM 52 FORM 52-1 JANUARY 1955 EDITION GSA GEN. REG. NO. 27 NATIONAL CHARTER 10		VOUCHERED TO UNVOUCHERED	
<b>REQUEST FOR PERSONNEL ACTION</b>			
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)		2. DATE OF BIRTH	
Miss Ann L. GCEPASTURE		28 Nov 1918	
3. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		4. DATE OF REQUEST	
Reassignment		30 Jan 57	
5. POSITION (Specify whether establish, change grade or title, etc.)		6. EFFECTIVE DATE A. PROPOSED:	
		B. APPROVED: 10 Mar 57	
FROM— I.O. (FI) BE-571 GS-0136.51-12 \$7570.00 p.a. DDP/NEA FI Staff Washington, D. C.		TO— I.O. (FI) BAF-400 GS-0136.51-12 \$7570.00 p.a. DDP/MI Branch III Mexico City, Mexico Station Mexico City, Mexico	
7. FIELD OR DEPARTMENTAL <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		8. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL (DI)	
9. REMARKS (Use reverse if necessary)			
Transfer TO Unvouchered Funds FROM Vouchered Funds 2 copies to Security			
10. REQUESTED BY (Name and title)		11. REQUEST APPROVED BY	
Philip C. Bowers		Signature: Jayille C. Dawson Title: C-571 MC	
12. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)		13. VETERAN PREFERENCE	
J. KOHLMEIER X8242		NONE WWII OTHER 5 PT. 15 POINT DISAB OTHER	
14. POSITION CLASSIFICATION ACTION		15. SEX	
NEW VICE 1 A. REAL		F	
16. APPROPRIATION		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)	
FROM 7-3300-20 TO 7-3570-55-060		Yes	
18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)		19. LEGAL RESIDENCE	
		CLAIMED <input type="checkbox"/> PROVED <input type="checkbox"/> STATE:	
20. STANDARD FORM 50 REMARKS			
21. CLEARANCES			
INITIAL OR SIGNATURE		DATE	
A.			
B. CEIL OR POS. CONTROL		10/25/57	
C. CLASSIFICATION		7/14/57	
D. PLACEMENT OR EMPL.			
E.			
22. APPROVED BY Philip C. Bowers			

STANDARD FORM 52  
PROPOSED BY THE  
U. S. CIVIL SERVICE COMMISSION  
JANUARY 1951 - PERSONNEL PERSONNEL  
BASIC CHAPTER II

# REQUEST FOR PERSONNEL ACTION

VOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname) <b>Miss Ann L. Goodpasture</b>	2. DATE OF BIRTH <b>28 Nov. 1918</b>	3. REQUEST NO.	4. DATE OF REQ. <b>24 Oct. 56</b>
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b>		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
B. POSITION (Specify whether establish, change grade or title, etc.)		8. APPROVED:	
FROM— <b>IO (FI) BE 27-12</b> <b>GS-0136.51-12 \$7570.00 p.s.</b> <b>DDP/REA</b> <b>FI Staff</b> <b>Washington, D.C.</b> <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		TO— <b>IO (FI) BE 571</b> <b>GS-0136.51-12 \$7570.00 p.s.</b> <b>DDP/REA</b> <b>FI Staff</b> <b>Washington, D.C.</b> <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	

A. REMARKS (Use reverse if necessary)

B. REQUESTED BY (Name and title)  
**T. J. Hester, REA/ADM/PERSONNEL**

C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)  
**Shirley Matthews ext. 8671**

D. REQUEST APPROVED BY

Signature: *[Signature]*

Title: *FE/CMO*

13. VETERAN PREFERENCE

None	WWII	OTHER	5 PT.	10 POINT
<input checked="" type="checkbox"/>				DISAB. OTHER

14. POSITION CLASSIFICATION ACTION

NEW	VICE	L.A.	REAL

SD-DI

15. SEX

**F**

16. APPROPRIATION

FROM **7-3300-20**

TO: *[Signature]*

17. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)

**Yes**

18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)

19. LEGAL RESIDENCE

☐ CLAIMED ☐ PROVED

STATE:

20. STANDARD FORM 50 REMARKS

21. CLEARANCES

A.

B. CEIL OR POS CONTROL

C. CLASSIFICATION

D. PLACEMENT OR EMPL

E.

INITIAL OR SIGNATURE

DATE

REMARKS:

F. APPROVED BY

*[Signature]*

*Dr. Ready 11/2/56*

STANDARD FORM 52  
FORM 52-1  
D. S. FIVE, SERVICE COMMISSION  
AND SIX, CIVIL SERVICE PERSONNEL  
MANUAL, CHAPTER 10

SECRET

VOUCHERED

# REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname) <b>Miss Ann L. Goodpasture</b>	2. DATE OF BIRTH <b>28 Nov 1918</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>21 Aug 56</b>
5. NATURE OF ACTION REQUESTED A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Promotion</b> B. POSITION (Specify whether establish, change grade or title, etc.)		6. EFFECTIVE DATE A. PROPOSED: B. APPROVED:	7. C.S. OR OTHER LEGAL AUTHORITY

8. POSITION TITLE AND NUMBER <b>10 (FI) BE-28</b>	9. SERVICE, GRADE, AND SALARY <b>08-0136.51-11 \$6605.00 per annum</b>	10. ORGANIZATIONAL DESIGNATIONS <b>DDP/NEA* FI Staff</b>	11. HEADQUARTERS <b>Washington, D. C.</b>	12. FIELD OR DEPARTMENTAL <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL
13. FIELD OR DEPARTMENTAL <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	14. POSITION CLASSIFICATION ACTION <b>10 (FI) BE-27-12</b>	15. SERVICE, GRADE, AND SALARY <b>08-0136.51-12 \$7570.00 per annum</b>	16. ORGANIZATIONAL DESIGNATIONS <b>DDP/NEA FI Staff</b>	17. HEADQUARTERS <b>Washington, D. C.</b>

A. REMARKS (Use reverse if necessary)

B. REQUESTED BY (Name and title)  
**T. J. HESTER, NEA/ADM/PERSONNEL**  
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)  
**Audrey Meadows, Ext 8671**

D. REQUEST APPROVED BY  
Signature: *[Signature]*  
Title: **C/FI**

13. VETERAN PREFERENCE  
NONE WWII OTHER S PT. 10 POINT  
DISAB OTHER  
☒ X

14. POSITION CLASSIFICATION ACTION  
NEW VICE I A PEAL

SD-DI

15. SEX  
16. APPROPRIATE AGENCY  
CHG NO. **6-3300-20**  
CHG NO. **7-3300-20**

17. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)  
**Yes**

18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)

19. LEGAL RESIDENCE  
☐ CLAIMED ☐ PROVED  
STATE:

20. STANDARD FORM 52 REMARKS  
*16 Oct 56 per person only newly established*  
*Approved by NEA PROMOTION*  
*21 Aug 56*

21. CLEARANCES	INITIAL OR SIGNATURE	DATE
A.		
B. CEIL OR POS CONTROL		
C. CLASSIFICATION		
D. PLACEMENT OR EMPL.		
E.		

REMARKS  
**26 11 10 28 04 28**  
**26 11 10 28 04 28**  
**26 11 10 28 04 28**

F. APPROVED BY  
*[Signature]*

SECRET

**26 11 10 28 04 28**  
**26 11 10 28 04 28**  
**26 11 10 28 04 28**

SECRET

17 July 1956.

MEMORANDUM FOR: NEA/ADM

SUBJECT : Ann L. Goodpasture

1. It is requested that subject employee be promoted from GS-11 to GS-12.

2. Miss Goodpasture was recently assigned to the NEA Division to act as Case Officer on Project PACT, a world-wide project of interest to high ranking officials in the Agency, State and Defense Departments. In addition to all material handled by Miss Goodpasture being slugged RYBAT, there is a further indicator assigned which allows distribution only to DCI, DDCI, DD/P and CREA, together with the undersigned.

3. Information received under Project PACT is disseminated by the Case Officer to officials mentioned above in addition to DDI, Chief, CI, CFP, and CFI, and other interested Division Chiefs. Material received is reproduced by subject and disseminated as above. In addition to the above duties, Miss Goodpasture analyzes information for dissemination, handles her own carding and writing of operational reviews.

4. Subject employee has been in grade since 4 July 1954 and her performance on her present assignment has been excellent. It is therefore recommended that this request for promotion be considered at the next NEA Promotion Board meeting.

NEA/CFI

NEA/CFI/FSH:ms

Distribution:

Addressee - orig. and 1

NEA/CFI - 1

NEA/FSRS - 1

NEA/CADM - 1

STANDARD FORM 52

PROPERTY OF THE  
U. S. GOVERNMENT  
EXEMPT FROM FEDERAL PERSONNEL  
MANUAL CHAPTER II

## REQUEST FOR PERSONNEL ACTION

SECRET

VOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname) <b>Miss Ann L. Goodpasture</b>	2. DATE OF BIRTH <b>28 Nov 1918</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>23 May 56</b>
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b>		6. EFFECTIVE DATE A. PROPOSED:	7. C. S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		9. APPROVED: <b>17 JUL 1956</b>	

FROM— <b>Operations Off. (CE) BB 574-11</b> <b>GS-0132.52-11 \$6605.00 per annum</b> <b>DDP/WE</b> <b>FI Staff</b> <b>Counter Espionage Section, Wash, D.C.</b> <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	10. POSITION TITLE AND NUMBER <b>IO (FI) BE-28</b> <b>GS-0136.51-11 \$6605.00 per annum</b> 11. ORGANIZATIONAL DESIGNATIONS <b>DDP/NEA</b> <b>FI Staff</b> <b>Reports &amp; Requirements Section</b> <b>Washington, D.C.</b> 12. FIELD OR DEPARTMENTAL <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL
---	---

A. REMARKS (Use reverse if necessary)

B. REQUESTED BY (Name and title) <b>T. J. HESTER, NEA/ADM/PERSONNEL</b>	D. REQUEST APPROVED BY Signature: <b>Robert A. Hester (ADM)</b> Title: <b>Acms 4 June '56</b>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>Rose M. Mazzucco - Ext 3671</b>	

13. VETERAN PREFERENCE NONE <input checked="" type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB. OTHER	14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/> <b>SD-DI</b>	17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>YES</b>	18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>Oklahoma</b>
--	--	--	--	---

20. STANDARD FORM 50 REMARKS <b>See back of file</b> <b>26 May 56</b> <b>7-15/56</b>
---

21. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			

F. APPROVED BY <b>Robert A. Hester</b>	<b>17/5/56</b>
---	----------------

STANDARD FORM 52  
FORM 52-1 (Rev. 1-55)  
U. S. CIVIL SERVICE COMMISSION  
PERSONNEL ACTION - PERSONNEL  
CHAPTER II

SECRET

REQUEST FOR PERSONNEL ACTION

VOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Mrs., Miss, One given name, initial(s), and surname) <b>Miss Ann L. GOODPASTURE</b>	2. DATE OF BIRTH <b>28 Nov 1918</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>29 Sept 55</b>
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b>		6. EFFECTIVE DATE A. PROPOSED: <b>ASAP</b>	7. C S OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED:	

FROM— <b>Para-Mil. Off. BB 101-11</b> <b>GS-0136.11-11 \$6390.00 p.a.</b> <b>DDP/WE</b> <b>French Branch, FI, PP, FM</b> <b>Washington, D. C.</b> <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	9. POSITION TITLE AND NUMBER 10. SERVICE GRADE, AND SALARY 11. ORGANIZATIONAL DESIGNATIONS 12. HEADQUARTERS 13. FIELD OR DEPARTMENTAL	TO— <b>Operations Officer (CS) BB 574-11</b> <b>GS-0132.52-11 \$6390.00 p.a.</b> <b>DDP/WE</b> <b>FI Staff</b> <b>Washington, D. C.</b> <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL <b>FI</b>
---	---	---

A. REMARKS (Use reverse if necessary)

*No change of duties or supervision*

1. CERTIFY funds available

Charge After No.

6-3600-20

B. REQUESTED BY (Name and grade) <b>A. M. GREGG, Personnel Officer, WE</b>	D. REQUEST APPROVED BY Signature: <i>[Signature]</i> Title: <i>FCM 7 Oct 55</i>
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>H. E. ETSSNER, x 3124</b>	

13. VETERAN PREFERENCE NONE <input checked="" type="checkbox"/> WWII <input type="checkbox"/> OTHER <input type="checkbox"/> 5 PT. <input type="checkbox"/> 15 POINT <input type="checkbox"/> DISAB. OTHER	14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I A <input type="checkbox"/> REAL <input type="checkbox"/> <b>SD-DI</b>
15. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F 16. RACE <input type="checkbox"/> W <input type="checkbox"/> O 17. APPROPRIATION FROM: <b>6-3600-20</b> TO: <b>same</b>	18. SUBJECT TO C S RETIREMENT ACT (YES-NO) <b>Yes</b>
19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	
20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>Okla.</b>	

21. STANDARD FORM 50 REMARKS

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL		<b>3 OCT 1955</b>	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			

F. APPROVED BY

SECRET

*[Signature]* **10 Oct 55**

STANDARD FORM 52  
PROVIDED BY THE  
U. S. CIVIL SERVICE COMMISSION  
JANUARY 1964 - FEDERAL PERSONNEL  
MANUAL, CHAPTER III

SECRET

# REQUEST FOR PERSONNEL ACTION

UNVOUCHERED TO VOUCHERED

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.  
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
Miss Ann L. GOODPASTURE	28 Nov. 1918		10 Feb 55
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. ON OTHER LEGAL AUTHORITY
Reassignment		ASAP	
8. POSITION (Specify whether establish, change grade or title, etc.)		9. APPROVED: [Signature]	

FROM-- Area Ops. Off. BRF 387 GS-0136.01-11 \$5940.00 p.a. DDP/NEA India, Pakistan, Afghanistan Br. New Delhi, India	10. POSITION TITLE AND NUMBER 11. SERVICE, GRADE, AND SALARY 12. ORGANIZATIONAL DESIGNATIONS 13. HEADQUARTERS 14. FIELD OR DEPARTMENTAL	TO-- Para-Mil. Off. BB 101-11 GS-0136.11-11 \$5940.00 p.a. DDP/WE French Branch, FI, PP, PM Washington, D. C.
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL	

15. REMARKS (Use reverse if necessary)  
Transfer TO Vouchered Funds FROM Unvouchered Funds. W-4 following  
Subject recently returned from the field, and has been assigned various temporary positions, pending permanent reassignment, therefore, no fitness report has been prepared on her, as it was felt she could not be properly evaluated.  
CONCUR FOR NEA: F. J. Daniels / [Signature]

16. REQUESTED BY (Name and title)	17. REQUEST APPROVED BY
A. M. GREGG, Personnel Officer, WE	[Signature]
18. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)	19. Title:
H. E. EISSNER, X 3422	[Signature]

20. VETERAN PREFERENCE	21. POSITION CLASSIFICATION ACTION
NONE WWI OTHER 5 PF. 10 PF. 15 PF. 20 PF. 25 PF. 30 PF. 35 PF. 40 PF. 45 PF. 50 PF. 55 PF. 60 PF. 65 PF. 70 PF. 75 PF. 80 PF. 85 PF. 90 PF. 95 PF. 100 PF.	NEW VICE I.A. REAL
<input checked="" type="checkbox"/> X	SD - [Signature]

22. SEX	23. RACE	24. APPROPRIATION	25. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)	26. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)	27. LEGAL RESIDENCE
M	W	FROM: 5-3340-55-013 TO: 5-3600-20	Yes		<input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: Okla

28. STANDARD FORM 50 REMARKS  
See Comm  
B.P. 1046  
Done  
[Handwritten notes and stamps]  
Approved FEB 15 1955  
PP/Career Service

29. CLEARANCES	30. INITIAL OR SIGNATURE	31. DATE	32. REMARKS
A.			
B. CEIL. OR POS. CONTROL	CPB	11/1/55	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			

33. APPROVED BY  
Ralph L. [Signature]  
25 FEB 1955



CONFIDENTIAL

## Office Memorandum • UNITED STATES GOVERNMENT

TO : Chief, WH  
THRU : WH/Admin

DATE: AUG 27 1954

FROM : Acting Chief, Security Control Staff/SO

SUBJECT: Clearance, Private Foreign Travel—GOODPASTURE, Ann L.

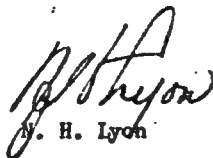
Reference: Memo dtd 19 Aug 54 to Chief, SCS from Miss Goodpasture

1. This Office interposes no objection to the proposed tour by Miss Goodpasture to Ireland, France, Italy and Portugal between the dates 8 October and 5 November 1954.

2. It is suggested that Miss Goodpasture review the provisions of Agency Regulation 10-10, dated 1 April 1951, and that she contact Miss Richter, extension 692, to make an appointment for a security briefing prior to her departure.

3. If feasible, it is requested that Miss Goodpasture submit to this Office a detailed itinerary of her prospective trip (in triplicate) prior to her departure.

4. Immediately upon return from private foreign travel, Miss Goodpasture will again contact the Security Control Staff and have her passport in her possession when she reports for a security de-briefing.

  
N. H. Lyon

SO/CDS:mkr

## Distribution:

- Orig. & 1 - Addressee
- 1 - SO File
- 1 - SCS File
- 1 - Chrono., SCS

CONFIDENTIAL

00000

SECURITY INFORMATION

HMTA-187  
5 October 1953

TO : Chief, WHD  
FOR : Chief, FD  
FROM : Chief of Substation,  
Monterrey, Mexico.  
SUBJ : Administrative  
Settlement Sheet  
REF : HMTA-114 dated 21 September 1953

*Goodpasture, Ann L.*

Subject is returning to headquarters on PCS and will settle the reference differential overpayment on his arrival there which should be on or before 20 October 1953.

David B. Keman

RBR:rbr

Distr:  
3-Hqtrs  
2-Mexico City  
2-Monterrey

HMTA-187  
5 Oct 53

SECRET

SECURITY INFORMATION

VIA AIR  
(Specify Air or Sea Pouch)

DISPATCH NO. NY-114

**SECRET**  
Security Classification

TO : Chief of Station, Monterrey

DATE SEP 21 1953

FROM : Finance Division

SUBJECT **GENERAL** Administrative  
**SPECIFIC** Settlement Sheet

REFERENCE: NYA-135 and Attachment

1. Receipt is acknowledged of above reference dispatch and attachment.
2. Headquarters finds that there is no adjustment due on the quarters allowance for the periods covered.
3. Due to the information in item #7 of PSI from #5079 to #5259 effective 7 June 1953, there has been an overpayment made to subject for the period 7 June thru 15 August 1953 in the net amount of \$30.74 as evidenced by attached payroll change notice #271 for the period 16 August-12 September 1953.
4. Since the difference between the ROBERT and CRAIG salaries is less than 100.00 per annum and settlement is to be made only once a year, it is suggested that a personal check for \$30.74 made payable to Paul Levantrel be forwarded to Headquarters to liquidate this overpayment.

10 September 1953  
Attachment: PC# (1)  
Distribution:  
3 Monterrey

*Robert T. Overholt*  
ROBERT T. OVERHOLT

*Answered in NYA-187  
5 Oct 1953*

RECEIVED OCT 5 1953

**SECRET**  
Security Classification

FORM NO. 51-28  
JUN 1949

00000

SECRET

SECURITY INFORMATION

MEMA-135  
20 July 1953

TO : Chief, WMD  
FOR : Chief, FD  
FROM : Chief of Substation,  
Monterrey, Mexico  
SUBJECT : Administrative  
Settlement Sheet - Robert B. RIGGS  
REF : Fiscal, Fld Reg 20-8 dated 19 August 1951

Attached is settlement sheet for the undersigned.

RRR:rbr

Robert B. Riggs

Attachment: 1

Distribution:

3-Hqtrs  
2-Mexico City (w/o attachments)  
2-Monterrey

MEMA-135  
20 July 53

SECURITY INFORMATION

SECRET

SECURITY INFORMATION

## SETTLEMENT SHEET

(Submit so as to arrive at Headquarters no later than 15 Aug.)

I certify that during the period 1 July 1952 to 30 June 1953, I received the following compensation, salary and allowances from ODACID.

1. Quarters Allowances \$200 p.a.
2. Post Allowances 0
3. Additional Dependency Allowances 0
4. Actual cost of quarters, including utilities 906 pa
5. Traveled outside my country of assignment on official business or annual leave during the period or periods indicated:  
 Annual leave in excess of 5 days:  
 19 May 1953 to June 2, 1953 (11 days)
6. Promotion from \$ 0 p.a. to \$ 0 p.a.
7. Periodic pay increase from \$5079 p.a. to \$5259 p.a. effective 7 June 1953.
8. Took one day of sick leave.
9. Worked no overtime for which compensation was claimed.
10. On no leave without pay.

30 June 1953

Robert B. Riggs

SECURITY INFORMATION

00000

HNIA-105  
3 June 1953

TO : Chief, WHD  
FROM : Chief of Substation,  
Monterrey, Mexico  
SUBJECT : Administrative  
~~XXXXXXXXXX~~

Robert B. RIGGS returned to Monterrey on 2 June.  
Please advise the appropriate KUCIAB individual.

DEK:rbr

David B. Kenan

Distribution:  
3-Wash  
2-Mexico City  
2-Monterrey

HNIA-105  
4 June 1953

CONFIDENTIAL

SECURITY INFORMATION

Dispatch No: HMYA-7  
30 October 1952

TO : Chief, WHD  
FROM : Chief of Substation,  
Monterrey, Mexico  
SUBJECT : Administrative  
Personnel - [REDACTED]

1. David Konan has asked that I state my preference with regard to home leave and reassignment. I will be eligible for home leave in July 1953 but it is not urgent that my leave be scheduled exactly when due. I would like, however, to know what opportunities exist with headquarters and whether I should be looking elsewhere for employment after July 1953.

2. With regard to another two year tour of duty in Monterrey, I would prefer a more responsible job than is foreseeable here. Now that the station files are set-up and the administrative routine is established, my job, while termed Administrative Assistant, is mainly that of a cleric-typist. The practice in typing has been good for me but I would like to look forward to a more responsible job for the next tour of duty. For instance, as a GS-9 I am performing the same type job which I did in 1945 at a CAF-4 and a considerably less responsible job than the one performed at headquarters as a P-2. While I have been taking Spanish lessons, I know that I am not proficient enough in the language for an assignment in Latin America, and feel that I would be better off in another area.

3. For the benefit of the case officer in assigning a replacement, Konan has suggested that I outline the duties which my replacement should be trained to perform. The routine can be learned in the field within two or three weeks.

- a) Copy typing. About 75% of the time will be taken up with routine typing.
- b) Index carding. About 600 index cards a week are now being typed for the card files and for the visa section files.
- c) Preparation of courier mail. Couriers usually go to the border approximately every two weeks but there is no regular schedule, and pouches are sometimes prepared on a few hours notice.
- d) Communications. The incumbent should have complete training for our codes for he will not have much practice in the field as only two or three messages are transmitted monthly.

CONFIDENTIAL

VIA: Air  
(Specify Air or Sea Pouch)

DISPATCH NO. HMY-W-20

**SECRET**  
Security CLASSIFICATION

DATE 31 DEC 1952

TO : Chief of Station, Monterrey, Mexico

FROM : Chief, Western Hemisphere

SUBJECT: GENERAL- Personnel

SPECIFIC- ~~████████████████████~~

Ref: HMY-A-7

1. At the present time, it is headquarters' plan to replace RIGGS with a young officer who is expected to arrive in May 1953. Biographic data will be provided in a subsequent pouch.

2. With regard to RIGGS' future assignment, he may be assigned to a headquarters position, which will offer more responsibility than his present assignment, if he so desires.

*Oliver G. Galbond*  
OLIVER G. GALBOND

*File  
JGJ*

FORM NO. 51-28  
MAR 1949

**SECRET**  
Security CLASSIFICATION

RECEIVED JAN 7 1953

16-53327-1 GPO



CONFIDENTIAL

SECURITY INFORMATION

e) Photography. At the present time, considerable operational use is being made of a darkroom at my residence. In addition to my own photographic equipment, the station photographic equipment is used there. My replacement should be trained in the use of the duo-printer and in 35mm copy work. If he has no personal photographic equipment, headquarters may wish to issue him a camera as there is only one camera at the station. Most of the copy work has been done with my personal reflex and enlarger.

f) Administrative Reports.

(1) Station Funds. He will be responsible for dispensing funds, keeping records and preparation of the monthly accounting reports.

(2) Property. He will be responsible for keeping records of government property and preparation of periodic reports and inventories.

(3) Exchange commodities. He will be responsible for keeping records and preparing periodic reports and inventories.

g) Maintenance of Files. The station files are set-up along the lines recommended by headquarters, and should require little time for upkeep.

h) Information Reports. Dependent upon the clerical workload, he may assist Ronan in the preparation of information reports.

i) Cover Job. None. If there are only two people at the station, the replacement for my job would not have time to perform a cover job and consequently, would have no regular working relationship with the DYNAMOCH employees.

4. A resourceful person can find Monterrey a very enjoyable post. From a social point of view, the city is not a dull place and either a single girl or man can find plenty of things to do. There are a limited number of single persons here, but one can always find somewhere to go and something to do. The American colony, as a whole, is the friendliest group that I have known at any post and they are very gracious with invitations to their homes. If headquarters has someone in mind for this post and would like elaboration on living conditions in Monterrey, I shall be glad to forward them on request.

RBR:rbr

Distribution:

2-Mexico City

3-Hqtrs

2-Monterrey

Robert B. Riggs

CONFIDENTIAL

VIA: 125  
(SPECIFY AIR OR SEA POUCH)

DISPATCH NO. 111-5

**SECRET**  
CLASSIFICATION

SEP 7-1951

DATE

TO : Chief Sub-station, Monterrey  
FROM : Acting Chief, Western Hemisphere Division  
SUBJECT: GENERAL- Administrative  
SPECIFIC- [REDACTED]

1. You are hereby notified that approval has been granted for subject to take Spanish lessons at Government expense abroad.

2. The following conditions govern this authorization:

- a. That the employee should receive this training under secure circumstances for reasons of immediate operational necessity;
- b. That the cost to the Government will not exceed \$250.00 during any fiscal year for subject; and
- c. That such language lessons will directly benefit the Government.

3. You may reference this dispatch as authority for payment when recording the disbursements in your monthly accounting reports.

*Dennis K. Copeland*  
DENNIS K. COPELAND

**SECRET**  
CLASSIFICATION

FORM NO. 51-28  
MAR 1949

16-4207-1 GPO

3.2.1

10 July 1951

Department of State  
Division of Foreign Service Personnel Records  
Room-A, SA-12  
Washington 25, D. C.

GOODPASTURE, Ann Lorane

Reference Clerk CAF-5 \$2770.00 Oct. 20, 1946 to Apr. 17, 1947.  
Administrative Asst. CAF-7 \$3397.20 Apr. 17, 1947 to Dec. 14, 1947.  
Administrative Asst. CAF-9 \$4479.60 Dec. 14, 1947 to Dec. 6, 1948.  
Administrative Asst. CAF-7 Dec. 7, 1948 to 3 Febr. 1951.  
Administrative Asst. GS-9 4 Febr. 1951 to 7 June 1951.

ADDRESS OFFICIAL COMMUNICATIONS TO  
THE SECRETARY OF STATE  
WASHINGTON 25, D. C.



DEPARTMENT OF STATE  
WASHINGTON

June 20, 1951

Central Intelligence Agency,  
Washington 25, D.C.

Gentlemen:

In accordance with the provisions of Chapter RI-35 of the  
Federal Personnel Manual, it is requested that the official per-  
sonnel file and leave record of Ann Lorene Goodpasture  
Administrative Assistant who e.o.d. June 8, 1951  
with this agency, date of birth Nov. 28, 1918,  
employed by CIA from December 1948 to March  
1951 at Washington, D.C. be forwarded to the following  
address at the earliest practicable date:

Department of State,  
Division of Foreign Service Personnel Records,  
Room-A, SA-12,  
Washington 25, D. C.

Very truly yours,

*Wm. E. Goodyear*  
Chief, Field Operations Branch  
Division of Foreign Service Personnel

Form FS-349

June 7, 1951

Goodpasture

Ann

Lorene

11-28-1918

PL-724-79th

FSS

Indefinite appointment

(E. O. 10180)

6-8-51

6-8-51

Administrative Assistant

Monterrey

FSS-9 \$4470

1a 2 992 110

MY-10

Indef

X

X

X

Female

Single

Items: A, b, c, d, i (61a)

SF 84 and 87 executed 6-8-51

No military reserve status

Appointed FSS-9 \$4290 and immediately promoted to FSS-9 \$4470  
 in accordance with FSR 102-669 (c). Previously employed by another  
 Government agency as GS-9 \$4600

*Ann L. Goodpasture*      *6-11-51*

PERSONNEL ACTION REQUEST				MASTER NO.	
NAME <b>GOODPASTURE, Ann L.</b>			REQUESTED EFFECTIVE DATE <i>COA 26 May 1951</i>		
NATURE OF ACTION <b>Resignation *</b>			WHEN LEAVING (VOUCHERED) LAST WORKING DAY: EMPLOYEE'S SIGNATURE: <i>Ann L. Goodpasture</i>		
FROM			TO		
TITLE <b>Intelligence Officer (Ops) GS-9</b>					
GRADE AND SALARY <b>GS-9 \$1600.00</b>					
OFFICE <b>OSO</b>					
DIVISION <b>NDZ/SEA</b>					
BRANCH AND SECTION <b>Branch I</b>					
OFFICIAL STATION <b>Washington, D. C.</b>					
DEPARTMENTAL <input checked="" type="checkbox"/>		FIELD <input type="checkbox"/>		DEPARTMENTAL <input type="checkbox"/>	
				FIELD <input type="checkbox"/>	
REMARKS: <i>* To accept other employment.</i> <b>TRANSFER LEAVE TO UV FUNDS</b>  <i># 6655</i>					
RECOMMENDED:  <i>23 April 1951</i> (DATE)  <i>[Signature]</i> (SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF OR AUP. OFFICER)					
FOR USE OF PERSONNEL ONLY					
PLACEMENT			TRANSACTIONS AND RECORDS		
DATE QUALIFICATIONS APPROVED <i>[Signature]</i> <i>4/24/51</i>			APPROPRIATION: <i>2115900</i>		
CLEARANCE REQUESTED			ALLOTMENT: <i>951-108</i>		
C. S. C. AUTHORITY:			DATE SIGNATURE		
DATE	TYPE	DATE	TYPE	SIGNATURE	
DATE	SIGNATURE		<i>6-26-51</i> <i>[Signature]</i>		
CLASSIFICATION			PERSONNEL RELATIONS		
BUREAU NO.	C. S. C. NO.	DATE APPROVED	DATE	SIGNATURE	
<i>1801</i>	<i>1241</i>	<i>12-19-47</i>	<i>[Signature]</i>		
NEW	VICE	L. A.	REAL	APPROVALS	
DATE	SIGNATURE		DATE		
EFFECTIVE DATE			DATE		
			SIGNATURE OF EXECUTIVE		
			SIGNATURE OF DIVISION CHIEF		

SECRET

APR 12 1955

MEMORANDUM FOR THE SECRETARY OF STATE

ATTENTION: Mr. W. Park Armstrong, Jr.

Subject: Request for Appointment in the Foreign Service as Administrative Assistant at Monterrey for Miss Ann Lorene Goodpasture.

Enclosure: a. Forms DD-204  
b. Standard Form 88 and 89  
c. Proposed Biography

1. It is requested that Miss Ann Lorene Goodpasture be appointed in the Foreign Service with the title of Administrative Assistant, GS-9, \$14,870.00, for duty in the American Consulate at Monterrey, Mexico.

2. Miss Goodpasture received her B.S. degree from the University of Oklahoma. She has had approximately seven years of administrative and secretarial experience in Government service and also served for one year and eight months as Administrative Assistant in the American Consulate General at Bombay, India. It is believed that Miss Goodpasture is fully qualified to serve as Administrative Assistant in the American Consulate at Monterrey. She will receive from GSA a basic salary of \$14,600.00 per annum.

3. Miss Goodpasture will perform the administrative duties for the CIA station to be opened in Monterrey.

FOR THE CHIEF OF CENTRAL INTELLIGENCE

W. C. WYMAN  
Assistant Director

SECRET

PERSONNEL ACTION REQUEST				REGISTER NO. 2019	
NAME <b>GOODPASTURE, Ann L.</b>			REQUESTED EFFECTIVE DATE <b>4/7/51</b>		
NATURE OF ACTION  <b>Promotion</b>			WHEN LEAVING (VOUCHERED)		
			LAST WORKING DAY: <b>1/4/56</b>		
FROM			TO		
TITLE <b>Intelligence Officer (Ops) GS-7</b>			<b>Intelligence Officer (Ops) GS-9</b>		
GRADE AND SALARY <b>GS-7 \$4325.00 f.a.</b>			<b>GS-9 \$4600.00 f.a.</b>		
OFFICE <b>OSO</b>			<b>OSO</b>		
DIVISION <b>FDZ/SEA</b>			<b>FDZ/SEA</b>		
BRANCH AND SECTION <b>Branch 1</b>			<b>Branch 1</b>		
OFFICIAL STATION <b>Washington, D. C.</b>			<b>Washington, D. C.</b>		
DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>			DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		
REMARKS:  <b>S-7</b> Employee has been in grade since 17 April 1947.					
RECOMMENDED:  <b>20 January 1951</b> (DATE) <b>B. M. Underwood</b> (SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF OR AID, OFFICER)					
FOR USE OF PERSONNEL ONLY					
PLACEMENT			TRANSACTIONS AND RECORDS		
DATE QUALIFICATIONS APPROVED <b>2/3/51 F. G. Jurena</b>			APPROPRIATION: <b>2115950</b>		
CLEARANCE REQUESTED			ALLOTMENT: <b>958-108</b>		
DATE TYPE			C. S. C. AUTHORITY: <b>Sch 4-1160</b>		
DATE TYPE			DATE SIGNATURE <b>2-5-51</b> <b>H. J. Jurena</b>		
DATE SIGNATURE			PERSONNEL RELATIONS		
DATE SIGNATURE			DATE SIGNATURE <b>2/3/51</b> <b>H. J. Jurena</b>		
CLASSIFICATION			APPROVALS <input type="checkbox"/> SUBJECT TO SECURITY CLEARANCE		
BUREAU NO. <b>1801</b> C. S. C. NO. <b>1741</b> DATE APPROVED <b>12/9/47</b>			DATE SIGNATURE OF EXECUTIVE		
NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input checked="" type="checkbox"/> REAL <input type="checkbox"/>			DATE SIGNATURE OF DIVISION CHIEF		
DATE SIGNATURE <b>2/2/51</b> <b>W. J. Jurena</b>			DATE <b>2/2/51</b> <b>H. J. Jurena</b>		
EFFECTIVE DATE					



PERSONNEL ACTION REQUEST				REGISTER NO. 2013	
NAME: <b>CONRADSTEIN, ANN E.</b>			REQUESTED EFFECTIVE DATE: <b>21 Dec 50</b>		
NATURE OF ACTION: <b>Reassignment</b>			WHEN LEAVING (VOUCHERED): <b># 4025</b>		
EMPLOYEE'S SIGNATURE: _____			_____		
TITLE: <b>Report Officer</b> <b>Intell. Off.</b> <b>GS-7</b>			TO: <b>Intell. Off. (Ops)</b> <b>GS-7</b>		
GRADE AND SALARY: <b>GS-7 \$1325.00 p.a.</b>			<b>GS-7 \$1325.00 p.a.</b>		
OFFICE: <b>OSO</b>			<b>OSO</b>		
DIVISION: <b>FDC/SEA</b>			<b>FDC/SEA</b>		
BRANCH AND SECTION: <b>Branch I</b>			<b>Branch I</b>		
OFFICIAL STATION: <b>Washington, D.C.</b>			<b>Washington, D.C.</b>		
DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>			DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/>		
REMARKS:  <b>S-7</b>					
RECOMMENDED:  <b>16 December 1950</b> <b>(DATE)</b> <b>B. J. Underwood</b> <b>(SIGNATURE OF OFFICE CHIEF, DIVISION CHIEF OR AGM OFFICER)</b>					
FOR USE OF PERSONNEL ONLY					
PLACEMENT			TRANSACTIONS AND RECORDS		
DATE QUALIFICATIONS APPROVED: <b>12/21/50</b> <b>FG Jarema</b>			APPROPRIATION: <b>2115-970</b>		
CLEARANCE REQUESTED			ALLOTMENT: <b>95-1-108</b>		
DATE	TYPE	DATE	TYPE	C. S. C. AUTHORITY: <b>Seha 6.1164</b>	
DATE	SIGNATURE		DATE SIGNATURE	SIGNATURE	
DATE	SIGNATURE		DATE SIGNATURE	SIGNATURE	
CLASSIFICATION			PERSONNEL RELATIONS		
BUREAU NO.	C. S. C. NO.	DATE APPROVED	DATE	SIGNATURE	
<b>1803</b>	<b>1740</b>	<b>12/19/47</b>	DATE	SIGNATURE	
NEW	VICE	I. A.	DATE	SIGNATURE	
DATE	SIGNATURE		DATE	SIGNATURE	
<b>20 Dec 50</b>	<b>(Austin J. Thomas) put off</b>		DATE	SIGNATURE	
EFFECTIVE DATE			DATE	SIGNATURE	
			<b>21 Dec</b>	<b>(Signature)</b>	

<div style="text-align: center;"><b>CONFIDENTIAL</b></div> <div style="text-align: center;">PERSONNEL ACTION REQUEST</div>			
NAME:  GOODPASTURE, Ann L.		CLASSIFICATION VICE IA VV NEW	INITIAL DATE 2-9-49 Aw # 01489 CSC # 1445 10-18-47 MM
NATURE OF ACTION: <i>Excepted Appointment</i>		QUALIFICATION & REVIEW	INITIAL DATE 3-8-49
EFFECTIVE DATE:  21 March 1949		2175-900 959-108 Suba-45 Reg 3-10-49	
FOR SEPARATIONS, TRANSFERS OUT, AND RESIGNATIONS LAST WORKING DAY:		APPROVED:	
FOR RESIGNATIONS FROM FEDERAL SERVICE ONLY SIGNATURE OF EMPLOYEE:		SIGNATURE (EXECUTIVE DIRECTOR)  SIGNATURE (EXECUTIVE FOR ASST)  George F. Miller 240 x2 Intelligence Officer (Intest) P-2	
FROM			
TITLE			
GRADE AND SALARY	P-2 \$3978.00 pa.		
OFFICE	OSG		
BRANCH	COPS - FBZ		
DIVISION	Previously employed at SEA		
SECTION	\$ 3978 per annum. Division #1		
OFFICIAL STATION	Washington, D.C.		
DEPT. OR FIELD	Departmental 130		
REMARKS: <i>charge against P-48 reports officer</i> This action cancels CONTROL #1234. Security concurrence requested Slot 48 7 February 1949. Please transfer accrued leave from unvouchered funds. From the only records available at this office, it appears subject EOD in February 1944 as a Stone, CAF-4. She went to the field thereafter as a CAF-5. She received her first periodic pay increase as a CAF-5 on 10 March 1946 and returned from the field on 30 March 1946. She returned to departmental rolls on 5 June 1946. She returned to unvouchered funds for duty in the field on 1 December 1946. She received a p.p.i. on 6 April 1947; and a promotion to Ad. Assistant, CAF-7, on 17 April 1947.			
RECOMMENDED: OFFICE CHIEF, BRANCH CHIEF, OR ADMINISTRATIVE OFFICER		(OVER) <i>Searched 1074</i>	
<i>[Signature]</i>		7 February 1949	

CONFIDENTIAL

*file*

28 April 1949

TO : Personnel Officer  
Attention: Betty Morrison  
FROM : Covert Personnel Branch  
SUBJECT : Ann L. Goodpasture

This is to certify that subject's "Transfer and Change to Lower Grade" has been amended as follows:

<u>From</u>	<u>To</u>	<u>Effective Date</u>
CAF-9, \$4479.60	CAF-7, \$3852.60	7 December 1948.

Subject's last periodic pay increase has been amended as follows:

<u>From</u>	<u>To</u>	<u>Effective Date</u>
CAF-7, \$3852.60	CAF-7, \$3978.00	26 December 1948.

*Harold E. Ballou*

Harold E. Ballou

CONFIDENTIAL

# Office Memorandum • UNITED STATES GOVERNMENT

*Goodpasture*

TO : George E. Maloon  
 FROM : Transactions & Records Division  
 SUBJECT:

DATE: 23 March 1949

The unvouchered records of the following employees appointed on Vouchered funds effective 21 March 1949, have revealed an error in computing periodic pay increases. In order to determine their last salary increase to establish a date they will be eligible for a periodic on vouchered funds the following information is furnished for action you deem necessary.

Goodpasture, Ann L.

(Temporary) Promotion effective 14 December 47, from CAF-7, \$3397.20 per annum to CAF-9, \$4149.60 per annum.

Return and Change to Lower Grade effective 7 December 1948, to CAF-7, \$3727.20 per annum.

Pay Increase (Periodic) effective 8 December 1948, from \$3727.20 to \$3978 per annum. (This is a jump of 2 steps)

The employee was not eligible for the above periodic until the first pay period following 14 December 1948, at which time she would have completed the one year waiting period since her last salary increase. Then the increase should have been from \$3727.20 to \$3852.60.

Reinsman, Erna H.

(Temporary) Promotion effective 16 November 1947 from CAF-5, \$2770.20 per annum to CAF-6, \$3146.40 per annum.

Return and Change to lower grade effective 28 July 1948, to CAF-5, \$3100.20 per annum.

Pay Increase (Periodic) effective 29 July 1948, from \$3100.20 to \$3225.20 per annum.

This employee was not eligible for the above periodic until the pay period following 16 November 1948.

Hennings, Willie May Connick

(Temporary) Promotion effective 16 November 1947, from CAF-6, \$3146.40 per annum to CAF-7, \$3522.60.

Return and Change to lower grade effective 4 August 1948, to CAF-6,  
\$3601.80 per annum.

This employee was eligible for a periodic pay increase the first  
pay period following 16 November 1948, provided she met the re-  
quirements.

**CONFIDENTIAL**  
PERSONNEL ACTION REQUEST

Rec'd 2/15  
P 204

NAME:  GOODPASTURE, Ann L.	CLASSIFICATION: VICE 1A VV NEW	INITIAL	DATE
NATURE OF ACTION:  Appointment	QUALIFICATION & REVIEW	INITIAL	DATE
EFFECTIVE DATE:  21 March 1949			
FOR SEPARATIONS, TRANSFERS OUT, AND RESIGNATIONS LAST WORKING DAY:	APPROVED: ✓		
FOR RESIGNATIONS FROM FEDERAL SERVICE ONLY SIGNATURE OF EMPLOYEE:	SIGNATURE (EXECUTIVE DIRECTOR)		
	SIGNATURE (EXECUTIVE FOR NEW)		
	SIGNATURE (CHIEF, PERSONNEL BRANCH)		
FROM:		TO:	
TITLE		Intelligence Officer (Rpts.)	
GRADE AND SALARY		P-2 \$3978.00	
OFFICE		OSO	
BRANCH		COPS - FBI	
DIVISION		SEA	
SECTION		Division #1	
OFFICIAL STATION		Washington, D.C.	
DEPT. OR FIELD		Departmental	
REMARKS:  This action cancels CONTROL #1434. Security concurrence requested Slot 48 7 February 1949. Please transfer accrued leave from unvouchered funds. From the only records available at this office, it appears subject EOD in February 1944 as a Steno., CAF-4. She went to the field thereafter as a CAF-5. She received her first periodic pay increase as a CAF-5 on 10 March 1946 and returned from the field on 30 March 1946. She returned to departmental rolls on 5 June 1946. She returned to unvouchered funds for duty in the field on 1 December 1946. She received a p.p.i. on 6 April 1947; and a promotion to Ad. Assistant, CAF-7, on 17 April 1947.			
RECOMMENDED BY: OFFICE CHIEF, BRANCH CHIEF	DATE	(OVER)	
Rec'd 2/15	7 February 1949		

She received temporary promotion to CAF-9 on December 1947. She returned from the field on 7 December 1948 and reverted to her CAF-7. She received a periodic pay increase on 8 December 1948 to \$3978.00 per annum.

PERSONNEL

PERSONNEL

24 February 1949

FEB 25

Comair for the Chief of Inspection and Security.

1949 MAR 29 AM 11 16

O.S.O.



EMMIL P. GEISS

Chief, Personnel Security Division

PERSONNEL  
FEB 15 2 35 PM '49

FEB 16 4 01 PM '49  
I & S

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**SECRET**

*my file*  
DEC 21 1948 *6*

**MEMORANDUM FOR THE SECRETARY OF STATE**

**ATTENTION: Mr. Fisher Howe**

**Subject : Cancellation of Foreign Service Title  
of Administrative Assistant at Bombay  
for Miss Ann Lorene Goodpasture**

1. This is to advise you that Miss Ann Lorene Goodpasture, CIA representative who has been serving at Bombay, India with the Foreign Service title of Administrative Assistant, has been transferred to Washington for a permanent change of station. It is requested, therefore, that the Foreign Service title for Miss Goodpasture be cancelled.

*W. G. Harp.*  
*for* DONALD H. GALLOWAY  
Assistant Director

**Attachment: Special Passport No. 713**

HP:jlm

**SECRET**



To: George E. Melson

From: Transactions & Records Division

The unvouchered records of the following employees as pointed on Vouchered funds effective 21 March 1949, have revealed an error in computing periodic pay increases. In order to determine their last salary increase to establish a date they will be eligible for a periodic on vouchered funds the following information is furnished for action you deem necessary,

✓ Goodpasture, Ann L.

(Temporary) Promotion effective 14 December 47, from CAF-7, \$3397.20 per annum to CAF-9, \$4149.60 per annum

Return and Change to Lower Grade effective 7 December 1948, to CAF-7, \$3727.20 per annum.

Pay Increase (Periodic) effective 8 December 1943, from \$3727.20 to \$3973 per annum. (This is a jump of 2 steps)

The employee was not eligible for the above periodic until the first pay period following 14 December 1948, at which time she would have completed the one year waiting period since her last salary increase. Then the increase should have been from \$3727.20 to \$3852.60.

Heinemann, Erma R.

(Temporary) Promotion effective 16 November 1947 from CAF-5 \$2770.20 per annum to CAF-6, \$3146.40 per annum.

Return and Change to lower grade effective 28 July 1948, to CAF-5 \$3100.20 per annum.

Pay Increase (Periodic) effective 29 July 1948, from \$3100.20 to \$3225.20 per annum.

This employee was not eligible for the above periodic until the pay period following 16 November 1948.

Hennings, Willie May Connick

(Temporary) Promotion effective 16 November 1947, from CAF-6 \$3146.40 per annum to CAF-7, \$3522.60.

COPY

Return and Change to lower grade effective 4 August 1948,  
to CAF-6, \$3601.80 per annum.

This employee was eligible for a periodic pay increase the  
first pay period following 16 November 1948, provided she met  
the requirements.

SECRET

CENTRAL INTELLIGENCE AGENCY  
COMMUNICATIONS DIVISION  
SIGNAL SECURITY AND CONTROL SECTION

COMMUNICATIONS CLASSIFIED

I, Ann L. Goodpasture, DO SOLEMNLY SWEAR (OR AFFIRM) NOT TO DIVULGE ANY CLASSIFIED INFORMATION CONCERNING THE COMMUNICATIONS OF THE CENTRAL INTELLIGENCE AGENCY AS TO ORGANIZATION, PERSONNEL, LOCATION, METHODS OF OPERATION, CRYPTOGRAPHIC SYSTEMS, COMMUNICATIONS CHANNELS AND FACILITIES USED.

I DO FURTHER SOLEMNLY SWEAR (OR AFFIRM) THAT I SHALL NOT DISCUSS, DIVULGE, PUBLISH OR CAUSE TO BE PUBLISHED ANY INFORMATION CONCERNING THE CRYPTOGRAPHIC FACILITIES, SYSTEMS, OR PROCEDURES EMPLOYED BY OTHER UNITED STATES GOVERNMENT DEPARTMENTS OR AGENCIES OF WHICH I AM COGNIZANT BY VIRTUE OF MY COMMUNICATIONS DUTIES WITH C.I.A.

I DO FURTHER SWEAR (OR AFFIRM) THAT I SHALL NOT DISCUSS, DIVULGE, PUBLISH OR CAUSE TO BE PUBLISHED ANY CLASSIFIED INFORMATION OR INTELLIGENCE OF WHICH I AM COGNIZANT BY VIRTUE OF MY COMMUNICATIONS DUTIES WITH C.I.A. UNLESS SPECIFICALLY AUTHORIZED IN WRITING IN EACH CASE BY THE DIRECTOR OF CENTRAL INTELLIGENCE.

I HAVE READ THE PROVISIONS OF THE ESPIONAGE ACT AND UNDERSTAND THAT AFTER SEVERING MY RELATIONS WITH THE COMMUNICATIONS DIVISION, C.I.A., I AM STILL BOUND BY THAT ACT AND IF IT IS VIOLATED, I AM SUBJECT TO ITS PENALTIES.

I DO FURTHER SOLEMNLY SWEAR (OR AFFIRM) THAT NO CLASSIFIED PAPERS, BOOKLETS, MATERIAL, OR EQUIPMENT REMAIN IN MY POSSESSION AND THAT ALL COMMUNICATIONS PROPERTIES, CLASSIFIED AND UNCLASSIFIED, HAVE BEEN RETURNED TO THE PROPER AUTHORITIES OF COMMUNICATIONS DIVISION, C.I.A.

I TAKE THIS OBLIGATION FREELY, WITHOUT ANY MENTAL RESERVATION OR PURPOSE OF EVASION.

SIGNED: Ann L. Goodpasture

DATE: 9 Dec 48

WITNESS: Walter P. Colman

POSITION: \_\_\_\_\_

DATE: 8/12/48

SECRET

SECRET

MEMORANDUM FOR THE RECORD

SUBJECT: ANNIE L. GOODENRUSH

The subject entered on duty with the predecessor organization in February 1944. She served in India and in China from November 1944 to March, 1946. She arrived at her present overseas post on 17 April 1947 under an 18 month overseas agreement. She is being returned P&S to the United States upon completion of her present tour of duty for reassignment, which will be determined upon her arrival in Washington. No per diem will be paid the subject while on duty in the United States.

*JER*  
*WY*  
*WY*  
*WY*

SECRET

SECRET

*218W*

*218W-136*

Air

Chief of Station, Bombay, India

29 March 1948

Chief, Administration and Services

Administrative

~~XXXXXXXXXX~~ ANN GOODPASTURE ✓

APR 6

1. In reference to ZIBA-85 and enclosure, you may inform Robert E. Biggs that he will be returned to the United States at the completion of his 18-month tour of duty. However, because of the fact that this tour of duty will not be completed until October, 1948, authorization for return will be pouches at a future date. In the meantime, efforts will be made to recruit a replacement for the slot which Biggs is now occupying.

E. M. TERRELL

020

1948 APR 6 PM 5 53

James H. Druss

BEB2000000 R.S.W.

W. Lloyd George

SECRET

# OFFICIAL DISPATCH

VIA: Air  
SPECIFY AIR OR SEA ROUCH

DISPATCH NO: ZIRA-85

SECRET  
CLASSIFICATION

TO : Chief, Foreign Branch Z  
FROM : Chief of Station, Bombay, India

DATE: 8 March 1948

SUBJECT: GENERAL: Administrative  
SPECIFIC: [REDACTED]

APR 6

1. The enclosed memorandum was given to me by [REDACTED] this date and its contents are self explanatory. I want to emphasize the fact that Riggs has definitely made up his mind and intends to comply with the plan as stated in the enclosure.

2. I desire to convey my unqualified commendation for the attitude and performance of duties offered by [REDACTED] during the past 11 months. In every instance he has been 100% cooperative with never a display of selfishness. All members of the Consulate are very fond of [REDACTED] as are the people of Bombay.

L. E. Y.

Lester E. Yorke.

REGISTRY COPY

SECRET  
CLASSIFICATION

FORM NO. 51-28  
APR 1947

MEMORANDUM

8 March 1948

TO : Lester E. Yorke

FROM: [REDACTED]

SUBJ: Return to US within 7½ months.

1. It is my desire to be returned to the United States upon completion of 18 months' overseas duty for the purpose of resignation after my arrival at headquarters.

2. This notice is given so that the organization will have ample time to replace me prior to October '48 should they desire to do so. Should they replace me immediately, all expenses incurred by the organization in connection with my return transportation will be reimbursed. APR 6

3. I desire to depart for the United States immediately upon completion of 18 months' overseas which will be October 18, 1948. Travel at that time will be at the expense of the organization in accordance with an agreement prior to my departure for overseas duty.

[REDACTED]

RECEIVED MAR 10 1948

6-1

ENCLOSURE

#1

**SECRET**

17 December 1947

*File*

(2)

MEMORANDUM FOR THE ASSISTANT DIRECTOR, SPECIAL OPERATIONS

THROUGH: Chief, Administration and Services

DEC 22

SUBJECT: Temporary Promotion of Anne L. Goodpasture

1. Forwarded herewith is a memorandum and attachments from the Chief, FBZ, to Chief, Personnel Division, recommending a temporary promotion from CAF-7 to CAF-9 of Anne L. Goodpasture.
2. The memorandum from the Branch and the attachments, an excerpt from the Consul General's dispatch to the Secretary of State, indicate that the cost of living at her station has reached a most burdensome point.
3. This office concurs in the recommendation that such temporary promotion be made.

*Robert S. Wattles*ROBERT S. WATTLES  
Acting Chief, Personnel Division, OSO

RECOMMEND APPROVAL:

*James H. Dunn*  
Chief, Administration and ServicesAPPROVED: *subject to concurrence Personnel Div Com.**Arnold Blumhary*  
Assistant Director, Special Operations*Recommend Approval  
WSJ.*36  
1.2**SECRET**



STANDARD FORM NO. 64

**SECRET**

(2)

*Office Memorandum* • UNITED STATES GOVERNMENT

TO : CPD

FROM : Chief, FEZ

SUBJECT: Ann L. Goodpasture

DATE: 12 December 1947

## Temporary Promotion

1. Subject is administrative assistant at our installation in Bombay, India. Due to the increased cost of living in Bombay, request is made that she be given a temporary promotion from a CAF-7 to a CAF-9. The increase in salary, plus the additional cost-of-living and quarters allowances, will be sufficient to permit Miss Goodpasture to meet the highly inflated cost of living in Bombay, an impossibility for the past several months.

2. A review of subject's reports on living conditions in Bombay reveals that since her arrival in April, she has had to live in temporary quarters on a day-to-day or week-to-week basis. The rooms occupied by subject have been shared with at least one other girl and sometimes two or three. Bathroom facilities are also shared with the other occupants of the hotel. During a period of several months, subject and her roommate occupied a nine by twelve room on the fifth floor of a "walk-up" and shared a bath with four men. This room cost them \$150 a month each. At the present time subject and her roommate are living in a single room, without private bath, and for the privilege are paying \$ Rs. 200 a week each (approximately \$60.).

3. In a dispatch dated 28 November, subject stated that "I am now spending more than my combined salary and allowances to maintain only a moderate standard of living. It appears at present that it is unlikely that any permanent quarters will be found for unmarried members of the staff. . . since four officers' families are en route to Bombay and three such families presently in Bombay are without places to live. Any accommodations secured through the Consulate will of course be made available first to the highest ranking officer in need of housing. Any accommodations found through other channels have so far been prohibitive in price. . . ."

4. In support of subject's statement of conditions she attached, at the Consul General's suggestion, a copy of his report to the State Department dated November 7, 1947. Pertinent portions of the Consul General's dispatch have been

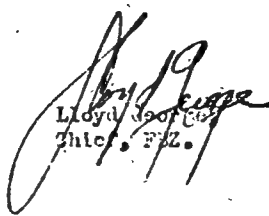
- 1 -

**SECRET**

SECRET

excerpted and are appended to this memorandum.

5. Subject's present salary, minus retirement and income tax, is \$105.12 per two-week pay period; her present living and quarters allowance amounts to \$78.45. The proposed increase to a CAF-9 would bring her net salary to \$127.42 per two-week pay period and her living allowance to \$103.07 - a difference of \$46.92 every two weeks. A promotion to a CAF-8 would be insufficient, since her allowances would remain the same and the salary increase would amount only to \$10.75 per pay period.

  
Lloyd George  
Chief, P&Z.

ORIGINATOR : Virginia Pryor 2P  
DEPUTY CHIEF FOR SEA: Don S. Garden 2P

- 2 -

SECRET

Despatch No. 537  
 File No. 125.42  
 JOHN J. MACDONALD, ad

AMERICAN CONSULATE GENERAL

Bombay, India, November 7, 1947

THE HONORABLE

THE SECRETARY OF STATE

WASHINGTON

SIR:

I have the honor to refer to my despatches numbered 93, 281 and 480 dated April 3, June 19 and September 15, 1947 respectively, and to report that the housing situation in Bombay is getting more critical daily.

\*\*\*\*\*

Not only is living at hotels unsatisfactory in this climate, but it is far more expensive than any member of this staff can afford. So far the staff has accepted the unsatisfactory and expensive living conditions without undue complaints but this situation cannot continue without seriously affecting morale and forcing resignations, or requests for transfers which I cannot conscientiously disapprove. The local authorities have been requested on numerous occasions to assist this office in obtaining living quarters and, although they have been making vague promises ever since my arrival last February, no houses or apartments have materialized. It is not likely that anything will be obtained through the Government unless a substantial bribe known locally as "pugree" is paid. It is generally recognized now that only persons and firms paying "pugree" get living accommodations.

An endeavor is being made to find a suitable residence for the Consul General and staff quarters that can be purchased, but the demand for all types of dwellings has resulted in fantastically high prices and it is doubtful that anything will be obtained.

This office had an opportunity of leasing a floor of a building that could have been made into three apartments as reported in my telegram No. 356 dated October 13, 1947. This request was disapproved by the Department and it is most unlikely that another opportunity of this sort will arise. It must be pointed out that if any places do become available, the landlord will demand a lease on behalf of the Department before he will even consider renting the place. Landlords with whom I have talked informed me that if any of their places do become available they will not lease them to members of the staff but will lease them to the Department.

I cannot stress sufficiently the seriousness of the present situation particularly, from the financial standpoint and request that the Department increase the rent allowance for members of the staff who are

forced to live in temporary quarters. If this is not done it will be impossible for them to live within their income if they remain at this post.....

Respectfully yours,

John J. MacDonald,  
American Consul General

SECRET

30 April 1947

Special Funds

Acting Chief, FBZ

Ann L. Goodpasture

1. Above subject arrived in Bombay, India 17 April 1947 according to a letter received from her last week.
2. Subject's promotion to CAF-7 becomes effective upon arrival.

*W. H. H.*  
Harry W. Little, Jr.  
Acting Chief, FBZ

ORIGINATOR: Virginia Pryor

ACTING CHIEF, DIV. 1, FBZ: Don S. Gardan *DSG*

cc: Captain Roger Hillsman

SECRET

SECRET

6 February 1947

MEMORANDUM FOR THE ACTING CHIEF, PBZ  
Through: ACOPS

Subject: Request for Designation of Ann Lorene Goodpasture

Reference: Memorandum for Mr. Zagler via Mr. Penrose from Mr. Joyce, subject, "Request from FBI for Foreign Service Title for Mr. Eric W. Sirm", dated 14 January 1947

Enclosure: Memorandum for Control via COPS from PBZ, subject, "Request for Designation of Ann Lorene Goodpasture", dated 30 January 1947 (triplicate) 1598

1. There is returned herewith the branch request for a Foreign Service title for Miss Ann Lorene Goodpasture. Before this title can be requested from the Department of State, complete information must be furnished.

2. EDUCATION is not to be combined with EXPERIENCE, but is to be set up as in sample personal history statement furnished on 13 September, and is to include names and locations of schools and colleges, dates attended and degrees conferred. The sample statement also specified that language qualifications are to be indicated by speaking, reading and writing abilities.

Robert P. Joyce  
Control

SECRET

**SECRET**

30 January 1947

**MEMORANDUM**

TO : Control

VIA : COPS *mt*

FROM : Acting Chief, FBZ

SUBJECT : Request for Designation of Ann Lorene Goodpasture

1. Will you please request the State Department to designate Ann Lorene Goodpasture as administrative assistant to the United States Consulate in Bombay, India.

(1) This station is not, and has never been, in operation by CIG. However, an intelligence officer has completed his training and will depart from the United States in February to implement the station.

(2) An intelligence officer will depart in February for assignment to the Bombay station. No CIG personnel are on duty there now.

(3) Miss Goodpasture has been an employee of OSS, SSU, and CIG since February 1944.

(4) Miss Goodpasture is now residing in Washington, D. C. She will complete her CIG training course on 7 February 1947, and will then be ready for entry in the Department of State's Foreign Service School.

(5) There has been no previous request for a designation for Miss Goodpasture.

(6) Miss Goodpasture will serve CIG in the capacity of administrative assistant to the senior intelligence officer.

(7) Miss Goodpasture will be the second employee to be assigned to the Consulate in Bombay.

(8) Miss Goodpasture's previous experience with OSS in India and China qualify her for the position of administrative assistant.

(9) For the present it is contemplated that Miss Goodpasture and the senior intelligence officer will be sufficient CIG representation in Bombay.

*Interviewed by Mr. [unclear]*

**SECRET**

100-1637  
1373

SECRET


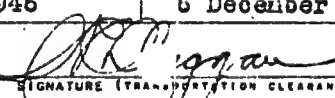
- 2 -

(10) Miss Goodpasture's present salary is \$2644.80 base, per annum, CAF-5. Upon her arrival in Bombay her base salary per annum will be \$3397.20, CAF-7.

(11) Miss Goodpasture's personal history statement is attached.

SECRET



REQ. ST FOR OVERSEAS TRANSPORTA. ON		SECRET
SEC. A	TO: Assistant Executive for Personnel	8 January 1947
YOUR APPROVAL IS REQUESTED FOR THE OVERSEAS TRANSPORTATION OF		ANN LORRAINE GOODPASTURE NAME OF TRAVELER
JUSTIFICATION FOR THE TRIP IS:		
<p>Miss Goodpasture is being transferred from Washington, D. C. to Bombay, India, where she will be assigned as Administrative Assistant at the American Consulate in Bombay.</p> <p>Designation has not been requested.</p>		
<u>8 January 1947</u> DATE		 SIGNATURE (INITIATING OFFICER)
THE FOLLOWING ACTIONS CONCERNING THE ABOVE TRAVELLER WERE COMPLETED ON THE DATES INDICATED BELOW:		
DATE ASSESSED AND APPROVED 25 August 1944		DATE SECURITY APPROVED 19 February 1944
DATE ENTERED ON DUTY 1 December 1946	DATE OF OVERSEAS PHYSICAL EXAMINATION 9 December 1946	DATE IMMUNIZATION INITIATED 6 December 1946
<u>10 January 19</u> DATE		 SIGNATURE (TRANSPORTATION CLEARANCE OFFICER)

DATE

8 Jan 47

## TRANSPORTATION ACTION SHEET

NAME

Goodpasture, Anna L.

BRANCH

712

Letter of Commitment

Draft Status

Navy or Marine Reserve

FORM 36-23

Sec. A.

Justification

Assessment

Security

EOD

Overseas Physical

Immunizations

Sec. B.

Travel Sponsor

Availability Date

Sec. C.

Completed

Transfer Letter

PCS

TDY

Auth. For Auto

To Duggan

To ADSO

Returned From ADSC

Approved

Disapproved

Copy to Special Funds

Copy to Strohl 7 March 47

RM 36-27

Trans. for Family

Person to be contacted

Date of Movement

Trans. of Household effects

Person to be contacted

Date of Movement

Strohl

Pfeifer

To ALSO

Returned From ADSC

Copy to Special Funds

Copy to Strohl

FORM 36-5 Cargo No.

11575

Completed

2 copies to Strohl

Pick-up date

Strohl

Pfeifer

FORM 36-5 (Auto.) Cargo No.

Completed

2 copies to Strohl

Pick-up Date

Strohl

Pfeifer

FORM 36-4 Cargo No.

11575

Completed

Copy to Strohl

Misc.

FORM 36-4 (Auto.) Cargo No.

Completed

Copy to Strohl

Misc.

Agreement for Auto.

Completed

Motorized

Cardex Card checked

5 March 47

Passport No.

Misc.

Filed

9 April 47

Departed 13 April 47

8 JAN 47  
(Date)

Central Intelligence Group  
New War Department Building  
21st & Virginia Avenue, N.W.  
Washington, D. C.

Gentlemen:

Pursuant to Section 7, Public Law 600, 79th Congress, 2nd Session, approved 2 August 1946, I hereby agree to remain in the Government service for the twelve months following my appointment, unless separated for reasons beyond my control. In case of a violation of this agreement, any moneys expended by the United States on account of my travel, expenses of transportation of my immediate family and expenses of transportation of my household goods and personal effects from any place of actual residence at time of appointment to place of employment outside the continental United States, and for such expenses on my return from such post of duty to my place of actual residence at time of assignment to duty outside the United States, shall be considered as a debt due by me to the United States.

It is further understood and agreed by me that I shall be required by Central Intelligence Group to serve a minimum period of ~~twenty-four~~ <sup>18 \*</sup> months at my place of employment outside the continental United States, and, if I wish to resign or terminate my appointment or return to the United States before the expiration of ~~twenty-four~~ <sup>18</sup> months after the date of departure for my overseas post, the Central Intelligence Group will not pay my return travel expenses from such station outside the United States.

Ann Louise Goodpasture

WITNESS:

Laurie Pfeiffer

\* agreement with this individual made before  
24 mon. order was promulgated.

John George

SECRET

22 November 1945

TO : Assistant Executive Officer.

FROM : ERL. *g*

THROUGH: ADO.

SUBJECT: Request For Waiver of Assessment of Ann Lorene GOODPASTURE.

Will you please grant a Waive of Assessment for the proposed assignment of Ann Lorene GOODPASTURE as administrative assistant attached to the American Consulate at Bombay, India?

Miss GOODPASTURE was previously assessed in August 1944. She has been employed by OSS, ESU and CIC continuously since February 1944. From February 1944 to November 1944, she served as secretary to the Chief, East Asia Economic Section, Far East Division, R&A Branch. From November 1944 to October 1945, she served as secretary and chief clerk to the Chief, OSS, R&A Branch, India, Burma and China Theaters, in New Delhi, India, Kandy, Ceylon and Kuming, China. From October 1945 to December 1945, she was assigned as secretary and chief clerk, IRIS, China Theater in Kuming, China and Shanghai, China. From December 1945, until the present time, she has been assigned as reference clerk, Order of Battle Section, SI, Shanghai, and to Registry, Washington.

*O/H*  
*all*

SECRET

PERSONNEL ACTION REQUEST  
(TO BE SIGNED AND SUBMITTED IN TRIPlicate)

NAME <u>ROOSENBURG, Ann L.</u>		INITIAL	DATE
NATURE OF ACTION: <u>Termination to accept accepted appointment.</u>		CLASSIFICATION	<u>12-11-46</u>
EFFECTIVE DATE: <u>17 November, 1946</u>		VICE	
FOR SEPARATIONS, TRANSFER OUT, AND RESIGNATIONS LAST WORKING DAY <u>18 November 1946</u>		IA	
FOR RESIGNATIONS FROM FEDERAL SERVICE ONLY SIGNATURE OF EMPLOYEE:		VV	
SPECIAL INSTRUCTIONS: 1 FOR MILITARY LEAVE WITHOUT PAY - ATTACH 3 COPIES OF MILITARY ORDERS AT LEAST ONE OF WHICH MUST BE A PHOTO-STAT OR CERTIFIED COPY. 2 EFFECTIVE DATE SHALL BE FILLED IN BY THE LEAVE UNIT, FINANCE BRANCH, FOR SEPARATIONS OR RESIGNATIONS.		NEW	
		BUDGET	<u>12-22-46</u>
		EMPLOYMENT	<u>12-22-46</u>
		CHIEF, CIVILIAN PERSONNEL BRANCH	<u>12-22-46</u>

FROM		TO
TITLE	<u>Clark</u>	
GRADE AND SALARY	<u>CAF-6 \$3770.20</u>	
BRANCH	<u>Director's Office, Senior</u>	
DIVISION	<u>Registry</u>	
SECTION	<u>FIELD</u>	
OFFICIAL STATION	<u>Washington, D. C.</u>	
DEPT. OR FIELD	<u>Departmental</u>	

REMARKS OR PROPOSED DUTIES:

Please transfer leave to Special Funds.

APPROVED

DEC 26 1946

RECOMMENDED:

*Phillips*

DA1

*9/12/46*

OFFICE CHIEF, BRANCH CHIEF, OR ADMINISTRATIVE OFFICER

## ENGAGEMENT SHEET

SECRET

1. To be filled out in duplicate by the Unit Administrative Officer for all prospective employees to be paid from Special Funds.
2. To be accompanied by detailed job description, complete biographical sketch, and a formal notice of security clearance, and Personnel Action Request if engagement is overseas.
3. To be approved or accepted by the officers in the order listed below.
4. Original to be retained by S.F.; copy to be returned to initiating Administrative Officer.

12 November 1946

1. NAME: Ann L. GOODPASTURE
2. LEGAL RESIDENCE: Oklahoma
3. ADDRESS OF LOCAL LIVING QUARTERS: 1514 17th St., NW Apt. 111 TEL. Da 0300, X-1112
4. ENTRANCE ON DUTY DATE: 1 December  
17 November 1946
5. ANNUAL SALARY: \$264.00 2772.00 CLASSIFICATION: CAF-5  
24 N
6. PERMANENT STATION: Bombay
7. POSITION: Clerk CONTROL NO. \_\_\_\_\_
8. IF SUBJECT HAS BEEN TRANSFERRED, STATE BUREAU, BRANCH, OR DEPARTMENT OF THE U.S. GOVERNMENT FROM WHICH TRANSFERRED: CIA Civil Service
9. GENERAL REMARKS: Please request leave balances from vouchered payroll.

## APPROVAL AND ACCEPTANCE

(in accordance with existing personnel engagement procedures)

- A. ADMINISTRATIVE OFFICER [Signature] DATE 13 Nov
- B. BRANCH CHIEF \_\_\_\_\_ DATE \_\_\_\_\_
- C. CHAIRMAN, PERSONNEL REVIEW COMMITTEE \_\_\_\_\_ DATE \_\_\_\_\_
- D. (For the) ASSISTANT DIRECTOR [Signature] DATE 15 Nov 1946
- E. CHIEF, SPECIAL FUNDS [Signature] DATE 18 Nov 46

SECRET

## Office Memorandum • UNITED STATES GOVERNMENT

SECRET

TO : ADO

DATE: 5 November 1946

Through: Acting Chief, FEZ *MA*  
FROM : Acting Chief, Div. 1, FEZ *MA*

SUBJECT: Ann Lorene Goodpasture

Division 1, FEZ, requests that the above subject be transferred from SSU Registry to Div. 1, FEZ. Three copies of her Form 57 are attached.

It is planned to send Miss Goodpasture to Bombay upon completion of her CIC and State Department training. Her present grade is a CAF-5, but her duties in her new position entitle her to a promotion to a CAF-7 upon her arrival in Bombay. A job description is attached.

When Miss Goodpasture first made known her desire to return to the Far East, this division contacted Registry and found that they were willing to release her for an overseas assignment. A replacement has already been obtained for her and Miss Goodpasture will be on leave from 4 November to 2 December, 1946. Registry agreed to carry her on their rolls until their personnel is terminated by SSU or until she can be picked up by CIC—which ever is sooner.

JOB DESCRIPTION

**SECRET**

**Junior Intelligence Officer**

**Clerk in State Department establishment abroad -- CAF-7**

Perform cryptographic duties for Senior Intelligence Officer; set up and maintain counter-intelligence card files and such other personality or intelligence files and records as are necessary for the use and information of the Principal State Department officer and the Senior CIG representative; assist in preparation of positive and counter-intelligence reports to Washington; collect and report to the Senior CIG officer such intelligence as she may be requested to obtain; perform secretarial and clerical duties as are required by Senior CIG officer.



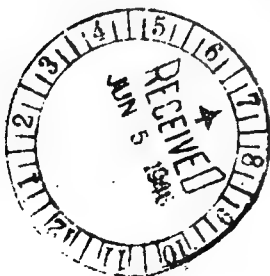
**OSS PERSONNEL ACTION REQUEST**  
(TO BE SIGNED AND SUBMITTED IN TRIPPLICATE)

<b>NAME:</b> Ann L. Goodpasture  <b>NATURE OF ACTION:</b> Transfer w/SSU  <b>EFFECTIVE DATE:</b> 5 June 1946 <i>Assign as possible</i>  <b>FOR SEPARATIONS, TRANSFERS OUT, AND RESIGNATIONS</b> <b>LAST WORKING DAY:</b>  <b>FOR RESIGNATIONS FROM FEDERAL SERVICE ONLY</b> <b>SIGNATURE OF EMPLOYEE:</b> <b>SPECIAL INSTRUCTIONS:</b> 1. FOR MILITARY LEAVE WITHOUT PAY--ATTACH 3 COPIES OF MILITARY ORDERS AT LEAST ONE OF WHICH MUST BE A PHOTO- STAT OR CERTIFIED COPY. 2. EFFECTIVE DATE SHALL BE FILLED IN BY THE LEAVE UNIT, FINANCE BRANCH, FOR SEPARATIONS OR RESIGNATIONS.	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;"><b>CLASSIFICATION</b> Encl</td> <td style="width:20%;"><b>INITIAL</b> LGLD</td> <td style="width:50%;"><b>DATE</b> 5/31/46</td> </tr> <tr> <td><b>VICE</b></td> <td></td> <td></td> </tr> <tr> <td><b>IA</b></td> <td colspan="2">✓ CLE # 9 Bu # 416 7/1/42</td> </tr> <tr> <td><b>VV</b></td> <td></td> <td></td> </tr> <tr> <td><b>NEW</b></td> <td></td> <td></td> </tr> <tr> <td><b>BUDGET</b> 135</td> <td></td> <td>5729</td> </tr> <tr> <td colspan="3"><b>EMPLOYMENT</b></td> </tr> <tr> <td colspan="3" style="text-align: center;">Reg XVI Sec 2</td> </tr> <tr> <td><b>CHIEF, CIVILIAN PERSONNEL BRANCH</b></td> <td></td> <td>6/5</td> </tr> </table>	<b>CLASSIFICATION</b> Encl	<b>INITIAL</b> LGLD	<b>DATE</b> 5/31/46	<b>VICE</b>			<b>IA</b>	✓ CLE # 9 Bu # 416 7/1/42		<b>VV</b>			<b>NEW</b>			<b>BUDGET</b> 135		5729	<b>EMPLOYMENT</b>			Reg XVI Sec 2			<b>CHIEF, CIVILIAN PERSONNEL BRANCH</b>		6/5
<b>CLASSIFICATION</b> Encl	<b>INITIAL</b> LGLD	<b>DATE</b> 5/31/46																										
<b>VICE</b>																												
<b>IA</b>	✓ CLE # 9 Bu # 416 7/1/42																											
<b>VV</b>																												
<b>NEW</b>																												
<b>BUDGET</b> 135		5729																										
<b>EMPLOYMENT</b>																												
Reg XVI Sec 2																												
<b>CHIEF, CIVILIAN PERSONNEL BRANCH</b>		6/5																										

FROM		TO	
<b>TITLE</b>	Clerk-Steno	<b>TITLE</b>	Clerk
<b>GRADE AND SALARY</b>	CAP-5, \$2430 per annum	<b>GRADE AND SALARY</b>	CAP-5, \$2430 per annum
<b>BRANCH</b>	SI	<b>BRANCH</b>	Registry
<b>DIVISION</b>		<b>DIVISION</b>	
<b>SECTION</b>		<b>SECTION</b>	Field
<b>OFFICIAL STATION</b>	Washington, D. C.	<b>OFFICIAL STATION</b>	Washington, D. C.
<b>DEPT. OR FIELD</b>	Field	<b>DEPT. OR FIELD</b>	Departmental

REMARKS OR PROPOSED DUTIES:

Miss Goodpasture is on an A-1-7 which expires on 30 June. She is to be assigned to the position being vacated by Louise M. White.



JUN 5 1946



RECOMMENDED: *Louis M. Germain*  
*Shaul*

24 May 46  
DATE:

Mr. Karlow, Secretariat  
via Mr. May  
C. J. Gilbert, Registry

22 May, 1946

Anne Goodpasture

It is requested that action be started to transfer Mrs. Anne  
Goodpasture, CAF-5, to Registry, Document Analysis Unit, to replace  
Mrs. Louise White, CAF-5, who is being transferred to Files.

No. \_\_\_\_\_  
(Not to be filled in by traveler)

OFFICE OF STRATEGIC SERVICES

Date: 2 April 1948

REQUEST FOR DOMESTIC TRAVEL ORDER

Anne L. Goodpasture CAF-5, 22820 p.e.  
(Name) (Grade and Title) (Serial No.)  
SI Washington, D. C.  
(Office or Branch) (Official Station)

1. Itinerary and justification of proposed travel (all stop overs must be specifically indicated and the need for the travel fully explained).

Embarked 1800 hrs	4 March
Left Shanghai	8 March
Arrived Seattle	20 March) Involuntarily detained by
Left Seattle	26 March) POB Emb. Officer
Arrived Chicago	29 March
Left Chicago	29 March
Arrived Washington	30 March

2. Duration of travel or authority requested: From 4 March To 30 March

3. Mode of travel (Check "X"):

☐ Personally owned automobile. ☐ Common Carrier. ☐ Government vehicle.  
(Commercial) (Commercial)  
☐ Extra fare train ☐ Airplane (Military) ☒ Vessel (Military)

- \*4. Allowance for personally owned automobile recommended on following basis (check):

☐ (a) \_\_\_\_\_ cents per mile, as being more economical and advantageous to the Government.  
Justify: \_\_\_\_\_  
☐ (b) \_\_\_\_\_ cents per mile when not practicable to use common carrier.  
☐ (c) \_\_\_\_\_ Actual expense.

- \*5. Per diem allowance recommended: Usual allowance

6. Number of transportation requests required: \_\_\_\_\_ Tax exemption certificates required

7. Estimated cost: \$ 200.

8. Allotment Account No.: 2101

9. Special provisions:

Approved:

Livia M. Jensen  
(Office or Branch Chief)

Adm. Asst. Staff I and II  
(Title) SI

100-20731-462  
Leave Unit

2 April 1946  
(1)

Staffs I and III, SI

Miss Ann L. Goodpasture

Miss Ann L. Goodpasture reported back to SI Washington from Shanghai on 1 April 1946. On the trip back, she developed a rather serious ear ailment, and it is feared that an operation may be necessary. Dr. Thompson of the Medical Division was going to attempt to have her admitted to a hospital Monday night for further attention and treatment. After release from the hospital she will go to her home in Tipton, Oklahoma.

In view of the above facts, we shall show Miss Goodpasture as being on sick leave (approximately one month) until her return to duty, at which time she will fill out the form 71 and any other necessary papers.

Livia M. Demian

PE25731

Mr. Chester J. Botticelli  
Payroll Section

2 April 1946

Staffs I and III, SI

Miss Ann L. Goodpasture

Miss Ann L. Goodpasture who returned from Shanghai on 1 April 1946 has informed me that she has cancelled her "Power of Attorney" in writing and that she has not been paid since 9 February.

It is requested that her case be checked and necessary steps be taken to reimburse her. Miss Goodpasture has been a Clerk-Steno, CAF-5, \$2320 with the SI office since 16 Dec. 1945. She departed from Shanghai on 5 March and arrived in Washington on 30 March.

Miss Goodpasture is being hospitalized immediately, due to a serious ear ailment which developed on the trip back, and will probably be out for approximately one month. Any payments should be mailed to her in Tipton, Oklahoma (no Street address), until further notice.

---

Livia M. Denian

00000

OSR FORM 1001  
(Rev. 4-14-44)

OSR PERSONNEL ACTION REQUEST  
BE SIGNED AND SUBMITTED IN TRIP (12)

NAME: <u>Goodpasture, Ann L.</u>	CLASSIFICATION <u>Encl</u>	INITIAL <u>JHC</u>	DATE <u>4/4/46</u>
NATURE OF ACTION: <u>Transfer</u> <u>Change to official station</u>	VICE	<u>F-5065</u>	
	IA		
	VV		
EFFECTIVE DATE: <u>30 March 1946</u>	NEW		
FOR REPARATIONS, TRANSFERS OUT, AND RESIGNATIONS LAST WORKING DAY:	BUDGET	<u>4-3</u>	
FOR RESIGNATIONS FROM FEDERAL SERVICE ONLY SIGNATURE OF EMPLOYEE:	EMPLOYMENT	<u>4-5</u>	
SPECIAL INSTRUCTIONS: 1. FOR MILITARY LEAVE WITHOUT PAY - ATTACH 3 COPIES OF MILITARY ORDERS AT LEAST ONE OF WHICH MUST BE A PHOTO- STAT OR CERTIFIED COPY 2. EFFECTIVE DATE SHALL BE FILLED IN BY THE LEAVE UNIT, FINANCE BRANCH, FOR SEPARATIONS OR RESIGNATIONS.	<u>A-1-7</u>		
	CHIEF, CIVILIAN PERSONNEL BRANCH	<u>BC. 2</u>	<u>Rogers</u>

FROM		TO
TITLE	<u>Clerk-Steno</u>	<u>Clerk-Steno</u>
GRADE AND SALARY	<u>CAP-5, \$2320 per annum</u>	<u>2420</u> <u>CAP-5, \$2320 per annum</u>
BRANCH	<u>SI</u>	<u>SI</u>
DIVISION		
SECTION		
OFFICIAL STATION	<u>Shanghai, China</u>	<u>Washington, D. C.</u>
DEPT. OR FIELD	<u>Field</u>	<u>Field</u>

REMARKS OR PROPOSED DUTIES:

\* Not to exceed 90 days within  
continental U.S.

RECEIVED  
APR 3 3 49 PM '46  
CIVILIAN PERSONNEL  
BRANCH OF  
PERSONNEL  
SERVICES

APPROVED  
COPY  
APR 8 1946

Livia M. Cleman

RECOMMENDED:

DA-711 1946

OFFICE CHIEF, BRANCH CHIEF, OR ADMINISTRATIVE OFFICER

OSR PERSONNEL ACTION REQUEST  
(TO BE SIGNED AND SUBMITTED IN TRIPLICATE)

NAME: Goodpasture, Anne		INITIAL: <i>AG</i> DATE: 1-22-46	
NATURE OF ACTION: Transfer		CLASSIFICATION: 5065	
EFFECTIVE DATE: 16 Dec 45		VICE	
FOR SEPARATIONS, TRANSFERS OUT, AND RESIGNATIONS LAST WORKING DAY:		IA	
FOR RESIGNATIONS FROM FEDERAL SERVICE ONLY SIGNATURE OF EMPLOYEE:		VV	
SPECIAL INSTRUCTIONS: 1. FOR MILITARY LEAVE WITHOUT PAY--ATTACH 3 COPIES OF MILITARY ORDERS AT LEAST ONE OF WHICH MUST BE A PHOTO- STAT OR CERTIFIED COPY 2. EFFECTIVE DATE SHALL BE FILLED IN BY THE LEAVE UNIT, FINANCE BRANCH, FOR SEPARATIONS OR RESIGNATIONS.		NEW	
		BUDGET	1-14
		EMPLOYMENT	1-24
		CHIEF, CIVILIAN PERSONNEL BRANCH	1-25

FROM		TO
TITLE	Clerk-Steno	Clerk-Steno
GRADE AND SALARY	CAF-5, \$2320	CAF-5, \$2320
BRANCH	RPA	SI
DIVISION		
SECTION		
OFFICIAL STATION	Shanghai	Shanghai
DEPT. OR FIELD	Field	Field

REMARKS OR PROPOSED DUTIES:

Information from Cable #30712, 5 Jan 46

RECEIVED  
JAN 25 1 43 PM '46  
CIVILIAN PERSONNEL  
OFFICE OF  
STRATEGIC SERVICES

APPROVE  
COPY

JAN 29 1946

RECEIVED  
JAN 19 11 51 AM '46  
CIVILIAN PERSONNEL  
OFFICE OF  
STRATEGIC SERVICES

Elizabeth B. Campbell

9 Jan 46

## REQUEST FOR SERVICE RECORD

### OFFICE OF STRATEGIC SERVICES

(Department, bureau, independent office, and branch)

RECEIVED DIRECTOR OF STRATEGIC SERVICES

March 3, 1944

(Date)

Chief, Retirement Division

U. S. Civil Service Commission, Washington, D. C.

It is requested that the complete official service record and retirement deductions by fiscal years be furnished for the following-named employee:

1. Name in full Goodpasture, Ann L.  
(Surname, first name, and middle initial; if married woman give maiden name)
2. Date of birth November 28, 1918
3. Date last appointed to this office February 129, 1944
4. Date deductions began \_\_\_\_\_
5. Service claimed as follows: \_\_\_\_\_

DEPARTMENT, BRANCH, OR INDEPENDENT OFFICE	BUREAU, AGENCY, ETC., AND LOCATION	TITLE OF POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year
War Relocation Authority	Personnel Mgmt Wash. D. C.	Clk. Stone	1620	12	1	43	2	28	44

REMARKS: \_\_\_\_\_

(Signature of appointing officer) \_\_\_\_\_

(Title) Director of Personnel

#### FOR USE OF CIVIL SERVICE COMMISSION

DATE	SENT FORWARDED TO--	Basic earn- ings	Ad- ditional service

To \_\_\_\_\_

Please furnish the Commission with a certified record of service and retirement deductions on Form 2806 for the periods indicated by mark (X) on the above schedule, together with a copy of this request. Prompt compliance with this request will be appreciated.

By direction of the Commission:

Very respectfully,

*Lewis H. Fisher*  
LEWIS H. FISHER,  
Chief, Retirement Division.

(Read carefully instructions on back)



Strategic Services

February 10, 1946

2387

xxxxxxx Indefinite  
xxxxxxx

for the duration of the  
emergency.

1 P Clerk-Stenographer

CAF-4, 11600 War Post  
Manpower and Military  
Supply

REGULATION 1A

The transfer of Miss Ann L. Goodpasture from War Relocation Authority, \$1630 per annum, under Regulation 1A is requested. Date of birth: November 20, 1916, place of birth: Collins, Tennessee, address: 247 Delaware Avenue, S. E., Apartment 300, Washington, D. C.

Under the general supervision of the Chief, Manpower and Military Supply Section, serves as his secretary; assembles and digests information and data for use by her superior in preparing intelligence and research reports and documents; takes and transcribes difficult dictation consisting of correspondence, memoranda and reports involving foreign geographic terminology; determines priority on office work distribution; takes verbatim transcripts of important telephone calls, conferences and meetings; independently composes correspondence in reply to requests for specific strategic information; receives callers and disposes of their business personally or refers them to the proper official; answers telephone inquiries requiring an intimate knowledge of the activities of the Section; arranges appointments, meetings and conferences; maintains leave and attendance records for the Section; is responsible for the maintenance of complete office files of research documents. (OVER)

Form 57 at - ended.

C.M.T. No. D-984

2/21/46

Acting Chief, Employment and  
Sement Division

**SECRET**  
(When Filled In)

1. NAME (Last, First, Middle) COOPER, Ann Lorene		3. SEX F		4. DATE OF BIRTH 28 Nov 1918		5. LONGEVITY COMP. DATE 18 Sep 1987	
6. MARITAL STATUS Single		7. DEPENDENTS (Include own) 0		8. US NATURALIZATION DATE None		9. SECURITY	
10. EMPLOYMENT HISTORY Jul 1954		11. OTHER STATUS None		12. LAST REG. OPT. QUAL. FOR 1972 Retirement		13. EVAL. FOR Med Retire	
14. CURRENT RESERVE STATUS X		15. GRADE		16. ACTIVE DUTY WITH CIA None		17. RELEASE TO MIL. SER. None	
18. ASSESSMENT DATE None		19. PROFESSIONAL TEST DATE None		20. LANGUAGE ATTITUDE TEST DATE None		21. TO BE CATERED None	
22. NON-CIA EMPLOYMENT 1941-32 Elko Photographic Finishing Co, Okla City, Okla - Photo Tech 1942-43 Office of Price Administration, DC - Clerk-Typist, Employee Services Officer 1943-44 Office of Emergency Management, DC - Clerk-Stenographer 1944-47 OSS, SSU & CIC, DC, India, Ceylon, China - Clerk, Clerk-Stenographer, Administrative Assistant							
23. NON-CIA EDUCATION 1937-41 Univ of Oklahoma - BS Education, Arts & Science 1941-42 Hills Univ, Oklahoma City, Okla - Business Administration; Typing							
24. FOREIGN LANGUAGE ACTIVITIES (Languages, Proficiency, Date Tested) Spanish - R, W High; P, U Intern; S, Slight; T, None May 1962 (disclaims pro Apr 1969)/							
25. AGENCY SPONSORED TRAINING 1947 State Orient 1951 CI Tech 1951 Comm Party Org & Cps 1955 CI Ops 1947 OSO Training 1951 Secret Writing 1951 Confid Funds (tutorial) 1949 Intel Orient 1951 Admin Proc 1955 Picks & Locks 1949 Ops Famil 1951 Comm Briefing 1955 Countespionage Cps							
26. CIA EMPLOYMENT HISTORY SINCE 18 SEPT 1947 (Personal Actions, Military Orders, and Principal Details)							
EFFECTIVE DATE   POSITION TITLE & OCCUPATIONAL CODE   GRADE   ORG   ORGANIZATION & ORG. TITLE (if any)   LOCATION							
Sep 1947	Admin Asst	0341.02	7	CSO/FBZ	Scarsay		
Dec 1947	"	0341.02	9	" "	"		
Dec 1948	"	0341.02	7	" "	Hq		
Mar 1949	Reports Off	0132.58	P-2	CSO/COPS/FBZ/SEA/Div #1	"		
Dec 1950	I.O. (Ops)	0132.00	CS-7	OSO/FDZ/SEA/Branch 1	"		
Feb 1951	"	0132.00	9	" " " "	"		
May 1951	"	0132.00	9	CSO/FDT	Monterrey		
Mar 1953	I.O.	0132.00	9	DDP/WH-3	"		
Feb 1954	I.O. (FI)	0132.06	9	DDP/WH/PBSUCCESS	Hq		
Jul 1954	"	0136.51	11	FI " " "	"		
Dec 1954	Area Ops Off	0136.01	11	FI DDP/NEA/IndiaPakistanAfghanBr	"		
Feb 1955	Paramilitary Off	0136.11	11	DI DDP/NE/French Br/FI, PP, FI	"		
Oct 1955	Ops Off (CE)	0132.52	11	DI DDP/NE/FI Staff/CE Section	"		
Jun 1956	I.O. (FI)	0136.51	11	DI DDP/NEA/FI Stf/Rpts&RqmtsSec	"		
Sep 1956	"	0136.51	12	DI DDP/NEA/FI Staff	"		
May 1957	"	0136.51	12	D DDP/WH-3/Mexico Sta	Mexico City		
Nov 1962	Ops Off	0136.01	13	D " " " "	"		
Jan 1964	"	Nov '68 re	13	D DDP/WH-1/Mexico Station	"		
Dec 1968	"	0136.01	13	DDP/WH/Rev Com (Chm)	Hq		
27. DATE REVIEWED 6 Mar 1973							
28. PROFILE REVIEWED BY hms/cal							
29. ITEMS 1-18 REVIEWED & VERIFIED BY EMPLOYEE CL BY 010006							
30. (CONTINUED) 110							

SECRET

(When Filled In)

PERS. SERIAL NO. 057303	BIOGRAPHIC PROFILE (PART I - Continued)
NAME (Last, First, Middle) GOODPASTURE, Ann Lorene	DATE OF BIRTH 28 Nov 1918

19. CIA EMPLOYMENT HISTORY SINCE 10 SEPT 1947 (Personnel Actions, Military Orders, and Principal Details)						
EFFECTIVE DATE	POSITION TITLE & OCCASIONAL CODE	GRADE	NO	ORGANIZATION & ORGAN. TITLE (If any)	LOCATION	
Oct 1970	Ops Officer	0136.01	13	D DDP/CISTf/opsGp/NEBranch	Hq	
Jul 1972	" "	0136.01	13	D DDP/CISTaff/Dev Comp	"	
DATE REVIEWED: 6 Mar 1973 PROFILE REVIEWED BY: hmc/cal E 2 IMPDET CL BY 010026						


FORM 1200-1a

SECRET

PROFILE

(4)

SECRET  
(When Filled In)

PERS. SERIAL NO. 057303		BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) GOODPASTURE, Ann Lorene		DATE OF BIRTH 28 Nov 1918	
13. SUMMARIES OF EVALUATIVE REPORTS FOR THE PAST TWO YEARS			
 <p>740101/4 JULY 69</p>			
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE			
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL			
26. ADDITIONAL INFORMATION Commendation 1954 from the DCI for splendid contribution to a project of special sensitivity and importance. Commendation 1959 from COS, Mexico City, for contribution to the preparation of charts for General Cassidy's visit.			
27. DATE REVIEWED 6 Mar 1973		28. PROFILE REVIEWED BY hms/cal E 2 IMPDET CL BY 010006	

FORM NO. 1200 (PART 2) REPLACES FORM 1000 (PART 2) SECRET  
1 FEB 67 WHICH IS OBSOLETE.

PROFILE

(4)

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				057303	
<b>SECTION A</b>				<b>GENERAL</b>	
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE	5. SO
GOODPASTURE ANN L.		11/28/18	F	13	D
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR. OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer		DDP/CI/OPS		Washington, D.C.	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
30 November 1971			18 October 1970 - 31 October 1971		
<b>SECTION B</b>					
<b>PERFORMANCE EVALUATION</b>					
<p><b>U-Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M-Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P-Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><b>S-Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O-Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Monitors all operational correspondence from the Far East Division Stations for counterintelligence leads and evidence of hostile espionage operations.					RATING LETTER
SPECIFIC DUTY NO. 2 Reviews field project outlines for evidence of penetrations, provocations, or foreign intelligence relationships. Advises Headquarters officers in preparation of security reviews. Represents CI Staff at DDP project review meetings when the senior officer is not available.					RATING LETTER
3 Alternate Headquarters case officer to the Chief, CIOPS/FE for sensitive Prescribed and Limited Distribution counterintelligence projects handled by CI Staff.					RATING LETTER
SPECIFIC DUTY NO. 4 Coordinates cables and dispatches from FE Division Headquarters to field stations on CI cases and agent clearances.					RATING LETTER
SPECIFIC DUTY NO. 5 Maintains background files for use in consultation with FE Division officers on CI problems.					RATING LETTER
SPECIFIC DUTY NO. 6 Prepares for Chief, CI, summaries of counterintelligence incidents which suddenly develop such as arrests, defections, and newspaper exposures.					RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER

SECRET

(When Filled In)

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

FEB 11 2 11 PM '74

See memorandum in lieu of Fitness Report.

## SECTION D

## CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

HOW LONG HAS EMPLOYEE BEEN UNDER MY SUPERVISION?

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE


SECRET

SECRET

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: Ann L. GOODPASTURE  
18 October 1970 - 31 October 1971

To the immense regret of this writer Ann Goodpasture is retiring very soon. It would be silly to rate her competitively against any of her colleagues, male or female, young or merely well-preserved. Concerning her fitness be it recorded that she is very fit indeed to perform any of the tasks listed as her current ones or almost any others I can think of at almost any grade. I venture to rate her over-all performance, thirty years of it, as OUTSTANDING. Ann is one of the tough warp-threads on which this organization is woven, and when she retires the fabric of this organization will be weakened.

  
William R. Johnson  
Chief, CI/OPS/FE

EMPLOYEE SIGNATURE:


  
Ann L. Goodpasture

16 FEB 1972

Date

COMMENTS OF REVIEWING OFFICIAL:

Miss Goodpasture is indeed a fine officer who consistently turns in a Strong performance when she is not doing an outstanding job. She is an excellent office and project manager who is cost conscious and she is a careful thorough instructor and briefer. Her retirement will leave a great gap in CI/OPS and, as Mr. Johnson has said, in the organization. I hope she gets the official Agency recognition she deserves for the many years she has made substantive contribution to the CS.

  
N. Scott MILER  
Chief, CI Operations

SECRET

17.2.72.

SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DATE 14 June 1972	FILE NO. 336
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION	SS NUMBER 446-14-9768	
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER 057303	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action) CI	ID CARD NUMBER	
ATTN: Chief Support Staff		OFFICIAL COVER	ESTABLISHED
REF: Retirement Debriefing		<input checked="" type="checkbox"/>	DISCONTINUED
SUBJECT: GOODPASTURE, Ann L.		UNIT	
<b>KEEP ON TOP OF FILE WHILE COVER IN EFFECT</b>			
ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS		CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS	
<input type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE		<input checked="" type="checkbox"/> EFFECTIVE DATE: EOD	
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR TOY OTHER (Specify)		<input checked="" type="checkbox"/> SUBMIT FORM 3254 CIA W-2 TO BE ISSUED. (HHR 20-11)	
SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HHR 20-7)		<input checked="" type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HHR 20-7)	
SUBMIT FORM 3254 W-2 TO BE ISSUED. (HHR 20-11)		NA EAA: CATEGORY I CATEGORY II	
SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR 240-20)		<input checked="" type="checkbox"/> RETURN ALL OFFICIAL DOCUMENTATION TO CCS	
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR 240-20)		NA SUBMIT FORM 2686 FOR HOSPITALIZATION CARD.	
EAA. CATEGORY I CATEGORY II		DO NOT WRITE IN THIS BLOCK	
SUBMIT FORM 2686 FOR HOSPITALIZATION CARD			
REMARKS AND/OR COVER HISTORY			
<p>Subject will be acknowledged as CIA for entire period of employment and is not to reveal specific places or locations of cover assignments.</p> <p>Forwarding address: 4200 Cathedral Avenue Washington, D.C.</p> <p>Employment address: None</p>			
DISTRIBUTION: COPY 1 - CO COPY 2 - OPERATING COMPONENT COPY 3 - O/S COPY 4 - DL/TELEVC COPY 5 - OF COPY 6 - GCS - FILE		<p style="text-align: center;"><b>MUST REMAIN TOP OF FILE</b></p> <p style="text-align: center;"><i>James H. Franklin</i> CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF</p>	



SECRET

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP		DA Form 13 May 1971	
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION	FILE NUMBER	336
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER	057303
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER	
ATTN: Chief/WH Support Staff		WH	
REF: Form 1413 dated 11 May 1971		OFFICIAL COVER	<input checked="" type="checkbox"/> BACKSTOP ESTABLISHED
SUBJECT: GOODPASTURE, Ann L.		UNIT: Department of State	<input checked="" type="checkbox"/> DISCONTINUED
<b>KEEP ON TOP OF FILE WHILE COVER IN EFFECT</b>			
ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS (OPM 20-800-11)		<input checked="" type="checkbox"/> CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS (OPM 20-800-11)	
A. TEMPORARILY FOR _____ DAYS EFFECTIVE DATE _____		DATE	From EOD
B. CONTINUING AS OF			
SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (NHB 20-7)		NA	SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (NHB 20-7)
<input checked="" type="checkbox"/> ASCERTAIN THAT _____ CIA _____ W-2 BEING ISSUED. (NHB 20-11)	NA	RETURN ALL OFFICIAL DOCUMENTATION TO CCS.	
SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HR-240-2a)		DO NOT WRITE IN THIS BLOCK - FOR CCS INTERNAL USE ONLY	
SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HR-240-2a)			
SUBMIT FORM 2688 FOR _____ HOSPITALIZATION CARD			
REMARKS AND/OR COVER HISTORY			
Subject is to indicate CIA as place of employment for entire period and not to reveal specific places or locations of cover assignments.			
DISTRIBUTION: COPY 1 - CC COPY 2 - OPERATING COMPONENT COPY 3 - D/OS COPY 4 - OL/TELSVC COPY 5 - OF COPY 6 - CCS - FILE		RF:km	<i>James H. Franklin</i> CHIEF, OFFICIAL COVER, CENTRAL COVER STAFF

FORM 12-70 1551 USE PREVIOUS EDITION

SECRET

(13-20-43)

VIA AIR (ENCL)

DISPATCH NO. (INVA-)

SECRET

CLASSIFICATION

TO Chief, WH Division

DATE 15 June 1957

FROM Chief of Station, Mexico City

SUBJECT GENERAL Administrative

SPECIFIC

*ANNE GOODPASTURE*

ACTION REQUESTED: See Para 5.

1. The following is submitted for the information of C/WH/ADMIN and the additional dissemination is considered necessary.

2. On 25 May 1957 the personal automobile owned by subject was hit by a tornado, removing the hood and other parts of the body. The auto was in custody of subject's brother (in the United States) who contacted the Lawton, Oklahoma, claims adjuster for subject's car insurance (the GEICO Government Employees Insurance Company, Washington, D.C.) who authorized complete coverage. Subject was unaware of the accident until repairs had been completed. There were no personal injuries and no newspaper accounts as this loss was insignificant compared to catastrophic flood and tornado damages in the area.

3. On the insurance policy taken out in 1955, Subject's employment was shown as U.S. Government with the Miami address. The claim to be valid had to show the same. The policy could not be amended to reflect subject's ostensible unemployment as this type of insurance is available only to U.S. Government employees.

4. Subject brought his automobile into Mexico on 1 June 1957 and is advising the GEICO that he expects to be in Mexico indefinitely and desires that his U.S. insurance be cancelled with receipt of the letter (probably about 10 June 1957.)

5. If queried by GEICO, it is requested that HQ acknowledge subject's EX-RANK employment to cover the period of the accident.

RBR

3 June 57

Distribution:

3-Hqtrs

2-Files

THIS INFO MUST REMAIN  
ON TOP OF FILE



SECRET

CLASSIFICATION

101-28A

**SECRET**  
(When Filled In)

RCS: 5 JULY 73

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
057303		GOODPASTURE ANN L.									
3. NATURE OF PERSONNEL ACTION: RETIREMENT (DISABILITY) UNDER CIA RETIREMENT AND DISABILITY SYSTEM FROM ESL								4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
								MO 06 30 YR 73		REGULAR	
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No Chargeable		8. CSC OR OTHER LEGAL AUTHORITY			
X		CF TO V		CF TO CF		3227 0163 0000		PL 68-643 SECT 231			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDO/CI STAFF DEVELOPMENT COMPLEMENT						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER					
OPS OFFICER						9997					
14. CLASSIFICATION SCHEDULE (GS, 18, etc)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP					
GS				0136.01		13 7					
18. REMARKS											
<div align="center">SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF</div> <div align="center">  </div>											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. HOURS CODE	25. DATE OF BIRTH				
45	40	NUMERIC ALPHABETIC					MO 11 DA 28 YR 1918				
28. INT. EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. Correction / Cancellation			
MO DA YR				1. CMC 2. CIA 3. FICA 4. NINE		01630000		MO DA			
33. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI - HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
CODE 0 NONE 1-5 PT. 2-10 PT.		MO DA YR		MO DA YR		SAR RESV PROV TEMP		CODE CODE 0. WAIVER 1 YES		HEALTH INS CODE	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE		43. FEDERAL TAX DATA			44. STATE TAX DATA		
CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)						FORM EXECUTED 1 YES 2 NO			CODE NO TAX EXEMPTIONS FORM EXECUTED 1 YES 2 NO		
SIGNATURE OR OTHER AUTHENTICATION											
<div align="center">  </div>											

1150  
Mfg. 11-71

Use Previous  
Edition

**SECRET**

**UNCLASSIFIED**

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 5305 AND EXECUTIVE ORDER  
11691 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,  
AS AMENDED, AND DCI DIRECTIVE DATED 08 OCTOBER 1962."

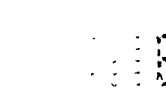
EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
GCODPASTURE ANN L	057303	31	997	V GS 13 7	\$23,642

SECRET

(When Filled In)

LNL: 24 OCT 72

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
057303		GOODFASTURE AM: L									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
EXTENDED SICK LEAVE DISABILITY RETIREMENT						MO DA YR 10 23 72		REGULAR			
6. FUNDS		X		V TO V		V TO CF		7. Financial Analysis No Chargeable		8. CSC OR OTHER LEGAL AUTHORITY	
				CF TO V		CF TO CF		3227 0183 0000		50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/CI STAFF DEVELOPMENT COMPLEMENT						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						9997		D			
14. CLASSIFICATION SCHEDULE (GS, LR, etc)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0126.01		13 7		22457			
18. REMARKS											
OTHER											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEREST CODE		24. MGRS CODE	
31		40		NUMERIC ALPHABETIC 01997 CI		75019					
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA	
MO DA YR 11 28 18		MO DA YR		MO DA YR		MO DA YR		1. CSC 2. CIA 3. FICA 4. NONE		CODE	
								SL			
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO	
CODE 0-NONE 1-5 PT. 2-10 PT.		MO DA YR		MO DA YR		CAR BESV PROV TEMP		CODE 0-WAIVER 1-YES		HEALTH INS CODE	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA			
CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)				FORM EXECUTED 1-YES 2-NO		CODE NO TAX EXEMPTIONS		FORM EXECUTED 1-YES 2-NO		CODE NO TAX EXEMP STATE CODE	
SIGNATURE OR OTHER AUTHENTICATION											
<div style="text-align: center;">   <b>SECRET</b>  <b>MLH</b> </div>											

FORM  
5-661150  
Mfg 11-71Use Previous  
Edition

SECRET

MLH

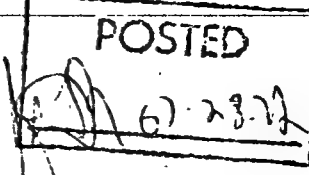
 EXCLUDED FROM AUTOMATIC  
 DOWNGRADING AND  
 DECLASSIFICATION

(When Filled In)

LH: 28 JUL 72

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
057303		GOODPASTURE ANN L									
3. NATURE OF PERSONNEL ACTION								4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS								07 23 72		REGULAR	
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY			
X		CF TO V		CF TO CF		3227 0183 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS								10. LOCATION OF OFFICIAL STATION			
DDP/CI STAFF DEVELOPMENT COMPLEMENT								WASH., D.C.			
11. POSITION TITLE								12. POSITION NUMBER		13. SERVICE DESIGNATION	
OPS OFFICER								9997		D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136.01		13 7		22487			
18. REMARKS											
OTHER W2 INFO: CIA											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. HOURS CODE	
16		18		31997 CI		75013				1	
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI		28. DATE OF BIRTH		29. DATE OF GRADE		30. DATE OF LEI	
11 28 18		11 28 18		11 28 18		11 28 18		11 28 18		11 28 18	
31. NTE EXPIRES		32. SPECIAL REFERENCE		33. RETIREMENT DATA		34. SEPARATION DATA CODE		35. Correct in Concurrence Data		36. SECURITY REQ FWD	
MO DA YR		1 2 3 4 5 6 7 8 9 10 11 12		1 2 3 4 5 6 7 8 9 10 11 12		1 2 3 4 5 6 7 8 9 10 11 12		1 2 3 4 5 6 7 8 9 10 11 12		1 2 3 4 5 6 7 8 9 10 11 12	
37. VET. PREFERENCE		38. SERV. COMP. DATE		39. LONG. COMP. DATE		40. CAREER CATEGORY		41. FEES / HEALTH INSURANCE		42. SOCIAL SECURITY FWD	
CODE		MO DA YR		MO DA YR		CODE		CODE		CODE	
0 NONE 1 5 YR 2 12 YR		MO DA YR		MO DA YR		CODE		CODE		CODE	
43. PREVIOUS CIVILIAN GOVERNMENT SERVICE				44. LEAVE ENT. CODE				45. FEDERAL TAX DATA			
CODE				CODE				CODE			
0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE LESS THAN 3 YRS 3 BREAK IN SERVICE MORE THAN 3 YRS				0 NONE 1 YES 2 NO				0 NONE 1 YES 2 NO			
46. STATE TAX DATA											
CODE											
0 NONE 1 YES 2 NO											
SIGNATURE OR OTHER AUTHENTICATION											
<div style="text-align: right;">   <b>POSTED</b>          67-23-12       </div>											

FORM 5-66 1150  
MAY 6-72

Use Previous Edition

SECRET

MLH

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND  
EXECUTIVE ORDER 11637 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE  
CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

NAME	SERIAL	ORGN.	FUNDS	GR	STEP	NEW SALARY
GOODPASTURE ANN L	057303	31	400	CF	GS 13 7	\$22,487

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND EXECUTIVE ORDER 11576 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 JANUARY 1971

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
GODPASTURE ANN L	057303	31	400	CF GS 13 7	\$21,313



I 52

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
057303		GRODPASTURE ANN I		51 997		CF			
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
GS 13	6	819,555	11/03/68	GS 13	7	820,114	11/01/70		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE <i>Paul E. Oberst</i>						DATE <i>9/16/70</i>			
<input type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERKS INITIALS				ADJUSTED BY <i>[Signature]</i>					
FORM 7-66 560 E Use previous editions PAY CHANGE NOTIFICATION (4-57)									

FVD: 3 NOV 70

SECRET  
(When Filled In)

## NOTIFICATION OF PERSONNEL ACTION

1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)	
057303		GOODPASTURE ANN L	
3 NATURE OF PERSONNEL ACTION		4 EFFECTIVE DATE	5 CATEGORY OF EMPLOYMENT
REASSIGNMENT (CORRECTION)		10 16 70	REGULAR
6 FUNDS	V TO V CF TO V	V TO CF CF TO CF	7 Financial Analysis No. Chargeable 1127 0170 0000
9 ORGANIZATIONAL DESIGNATIONS		8 CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J	
DDP/CI STAFF OPERATIONS GROUP WE BRANCH		10 LOCATION OF OFFICIAL STATION WASH., D.C.	
11 POSITION TITLE		12 POSITION NUMBER	13 SERAIL DESIGNATION
OPS OFFICER		0073	D
14 CLASSIFICATION SCHEDULE (GS 18 - 19)	15 OCCUPATIONAL SERIES	16 GRADE AND STEP	17 SALARY OR RATE
GS	0136.01	13 6	19555
18 REMARKS THIS ACTION CORRECTS FORM 1150 EFFECTIVE 10/16/70 AS FOLLOWS: ITEM #6 FUNDS WHICH READ V TO V TO READ CF TO CF. ITEM #7 FAN WHICH READ 1227 0170 0000 TO READ 1127 0170 0000.			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING	22 STATION CODE
		NUMERIC ALPHABETIC	
23 INTEGRITY CODE	24 RESERVE CODE	25 DATE OF BIRTH	26 DATE OF GRADE
		MO DA YR	MO DA YR
		11 28 18	
27 DATE OF LEI	28 NTE EXPIRES	29 SPECIAL REFERENCE	30 RETIREMENT DATA
	MO DA YR		1. CSC 2. CIB 3. PCA 4. NONE
			31 SEPARATION DATA CODE
			32 Correction / Cancellation Date
			MO DA YR
33 SECURITY REQ NO	34 SER. COMP DATE	35 LONG. COMP DATE	36 CAREER CATEGORY
	MO DA YR	MO DA YR	CODE
			37 REGAL HEALTH INSURANCE
			CODE
38 SOCIAL SECURITY NO	39 PREVIOUS CIVILIAN GOVERNMENT SERVICE	40 LEAVE CAT CODE	41 FEDERAL TAX DATA
	0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE (LESS THAN 3 YRS) 3. BREAK IN SERVICE (MORE THAN 3 YRS)		FORM EXECUTED 1. YES 2. NO
			42 STATE TAX DATA
			FORM EXECUTED 1. YES 2. NO
SIGNATURE OR OTHER AUTHENTICATION			

FORM 1150  
5-66 Mfg 6-70Use Previous  
Edition

SECRET BSI

Each fed from/automate  
downgrading and  
declassification

(When Filled In)

POSTED

11-8-70

ca

FVD: 27 OCT 70

SECRET  
(When Filled In)

OCF		NOTIFICATION OF PERSONNEL ACTION			
1 SERIAL NUMBER		2 NAME (LAST FIRST MIDDLE)			
057303		GOODPASTURE ANN L			
3 NATURE OF PERSONNEL ACTION			4 EFFECTIVE DATE		5 CATEGORY OF EMPLOYMENT
REASSIGNMENT			MO DA YR 10 18 70		REGULAR
6 FUNDS			7 Financial Analysis No. Chargeable		8 CSC OR OTHER LEGAL AUTHORITY
X V TO V CF TO V			1227 0170 0000		50 USC 403 J
9 ORGANIZATIONAL DESIGNATIONS			10 LOCATION OF OFFICIAL STATION		
DDP/CI STAFF OPERATIONS GROUP WE BRANCH			WASH., D.C.		
11 POSITION TITLE			12 POSITION NUMBER		13 SERVICE DESIGNATION
OPS OFFICER			0073		0
14 CLASSIFICATION SCHEDULE (OS 18, 16)		15 OCCUPATIONAL SERIES		17 SALARY OR RATE	
GS		0136.01		13 6 19555	
16 REMARKS					
HOME BASE: WH					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODING	22 STATION CODE	23 INTEGREE CODE	24 MILITARY CODE
37	10	NUMERIC ALPHABETIC 31400 C1	75013		
25 DATE OF BIRTH		26 DATE OF GRADE		27 DATE OF LEI	
MO DA YR 11 28 18		MO DA YR		MO DA YR	
28 NTE EXPIRES		29 SPECIAL REFERENCE		30 RETIREMENT DATA	
MO DA YR				1. CSC 2. CBA 3. PCA 4. NCPA	
				CODE	
31 SEPARATION DATA CODE		32 CORRECTION / CANCELLATION DATA		33 SECURITY REQ. NO.	
TYPE		MO DA YR		EOD DATA	
35 VET PREFERENCE		36 SERV. COMP DATE		37 LONG COMP DATE	
CODE		MO DA YR		MO DA YR	
0 NONE 1 5 YR 2 10 YR					
38 CAREER CATEGORY		39 FEUIL / HEALTH INSURANCE		40 SOCIAL SECURITY NO.	
CAR RESV PROV TEMP		CODE CODE		0 WAIVER 1 YES	
				HEALTH INS CODE	
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE		42 LEAVE CAT CODE		43 FEDERAL TAX DATA	
CODE				STATE TAX DATA	
0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)				FORM EXECUTED 1 YES 2 NO	
				CODE NO TAX EXEMPTIONS	
				FORM EXECUTED 1 YES 2 NO	
				CODE NO TAX EXEMPT	
SIGNATURE OR OTHER AUTHENTICATION					
FROM: WH					
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <b>POSTED</b>  10-27-70  <i>[Signature]</i> </div>					

FORM 566 1150  
Mfg 6-70

Use Previous Edition

SECRET

DMB

Excluded from automatic  
downgrading and  
declassification

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 28 DECEMBER 1969

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	NEW SALARY
GOODPASTURE ANN L	057303	51	997	CF GS-13 5	\$19,555

14-00000

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 212 OF PL 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 6 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	GRN.	PONDS	GR-STEP	NEW SALARY
GOODPASTURE ANN-L	057303	51	997	OF GS 13 6	\$18,447

SF: 2 DEC 62

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
057303		GOODPASTURE ANN L									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
REASSIGNMENT				12   01   63		REGULAR					
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No. Chargeable		8. CSC OR OTHER LEGAL AUTHORITY			
		CF TO V		X CF TO CF		9135 0623 0000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP WH DEVELOPMENT COMPLEMENT						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						9997		D			
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136.01		13 6		16809			
18. REMARKS											
OTHER											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. HOURS CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF 1E1
37	18	51997 V.H.		75013		1	11   28   18				
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. Correction/Cancellation Data		33. SECURITY REQ. NO	
NO DA YR				CODE		TYPE		NO DA YR		34. SEX	
								EOD DATA			
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. FEGLI - HEALTH INSURANCE		40. SOCIAL SECURITY TWO.	
CODE		MO DA YR		MO DA YR		CODE		CODE		CODE	
1. NONE 2. 5 PT 3. 10 PT						CAR PROU		HEALTH INS CODE			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA	
CODE				CODE		CODE				CODE	
1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE (LESS THAN 3 YRS.) 4. BREAK IN SERVICE (MORE THAN 3 YRS.)				1. YES 2. NO		1. YES 2. NO				1. YES 2. NO	
SIGNATURES OR OTHER AUTHENTICATION											
<div style="float: right; border: 1px solid black; padding: 5px;"> <b>POSTED</b>  <i>pjc</i> </div>											

FORM 5-60 1153  
MAY 10-67

Use Previous Edition

SECRET

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

651

1. SERIAL NO.		2. NAME		3. ORGANIZATION		4. FUNDS		5. LWOP HOURS	
057303		GOODPASTURE ANN L		51 620		CF			
6. OLD SALARY RATE				7. NEW SALARY RATE				8. TYPE ACTION	
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ.
GS 13	5	\$16,329	11/06/66	GS 13	6	\$16,809	11/03/68		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE <i>W. K. [unclear]</i>					DATE				
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERKS INITIALS		[Signature] <i>2</i> <i>Seq</i>							
FORM 7.25 560 E Use previous editions <span style="float: right;">(4 51)</span> PAY CHANGE NOTIFICATION									

*J.P.*

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-206 AND EXECUTIVE ORDER 11413 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
GOODPASTURE ANN L	057303	51	620	CF GS 13 5	\$15,307	\$16,329



"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-266  
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,  
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
GOODPASTURE ANN L	057303	51	620	CF GS 13 5	\$14,665	\$15,307

*CPW 11*      *C46*

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
057303		GOODPASTURE ANN L		51 620 CF						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last EM Date	Grade	Step	Salary	Effective Date	PSI	ESI	ADI
GS 13	4	114,217	11/08/64	GS 13	5	114,000	11/08/66			
8. Remarks and Authentication										
<p>✓ NO EXCESS LWOP          ✓ IN PAY STATUS AT END OF WAITING PERIOD          ✓ LWOP STATUS AT END OF WAITING PERIOD          CLERKS INITIALS      AUDITED BY</p> <p>I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS          OF AN ACCEPTABLE LEVEL OF COMPETENCE.</p> <p>SIGNATURE: <i>[Signature]</i>      DATE: <i>11-2-66</i></p> <p><b>PAY CHANGE NOTIFICATION</b></p>										

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504,  
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,  
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
GOODPASTURE ANN L	057303	51	620	CF GS 13 4	\$13,815	\$14,217

FORM 11 FEB 66

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
057305		GODPASTURE ANN L									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM				02-13-66		REGULAR					
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
V TO V CF TO V		V TO CF CF TO CF		6135 0050 0000		SECTION 208 P.L. 89-343					
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION							
DDP/WH FOREIGN FIELD BRANCH 1 MEXICO CITY, MEXICO STATION				MEXICO CITY, MEXICO							
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION					
OPS OFFICER				0418		D					
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0136.01		13-4		13915					
18. REMARKS											
EMPLOYEE WILL RECEIVE NOTIFICATION FROM THE DIRECTOR OF PERSONNEL OF THIS DESIGNATION.											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. HOURS CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI
28	10	51620 WH		45075		3	11-29-19		11-11-62		11-09-64
29. HIRE EXPIRES		30. SPECIAL REFERENCE		31. RETIREMENT DATA		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO.		34. SEX	
NO. DA. YR		1 - CSC 2 - FICA 3 - NONE		CODE		TYPE NO. DA. YR		EOD DATA			
35. VET. PREFERENCE		36. SERV COMP DATE		37. LONG COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
CODE 0 - NONE 1 - 5 PT 2 - 10 PT		NO. DA. YR		NO. DA. YR		CAR. BVSU PROV. TEMP		CODE CODE 0 - WAIVER 1 - YES		HEALTH INS. CODE	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA			
CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)				CODE		FORM EXECUTED 1 - YES 2 - NO		CODE NO. TAX EXEMPTIONS		FORM EXECUTED 1 - YES 2 - NO	
SIGNATURE OR OTHER AUTHENTICATION											

FORM 11-62 1150

Use Previous Edition

SECRET

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301  
PURSUANT TO AUTHORITY OF ICT AS PROVIDED IN THE CIA ACT OF 1949,  
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
GOODPASTURE ANN L	057303	51	620	CF GS 13 4	\$13,335	\$13,815

**SECRET**  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
OCS 05/27/65									
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)							
057303		GOODPASTURE ANN L							
3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
REASSIGNMENT			05 31 65						
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
<table border="1"> <tr> <td>V TO V</td> <td>V TO CF</td> </tr> <tr> <td>CF TO V</td> <td>CF TO CF</td> </tr> </table>		V TO V	V TO CF	CF TO V	CF TO CF	5135 0990 0000			
V TO V	V TO CF								
CF TO V	CF TO CF								
9. ORGANIZATIONAL DESIGNATION			10. LOCATION OF OFFICIAL STATION						
DDP/WH DIVISION			MEXICO CITY, MEXICO						
11. POSITION TITLE			12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION				
OPS OFFICER			0418		D				
14. CLASSIFICATION SYMBOL (GS, GS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP					
05		0136.01		13					
17. SALARY OR RATE									
18. REMARKS									
<div align="center"> <p><b>POSTED</b></p> <p>6-9-65 Ht</p> </div>									
SIGNATURE OR OTHER AUTHENTICATION									

Form 11508  
1-63 MFC-1-63

Use Previous  
Edition

**SECRET**

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

31)

13

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours	
057303		GOODPASTURE ANN L		51 700 CF			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date
GS 13	3	\$12,915	11/10/63	GS 13	4	\$13,335	11/08/64
7. TYPE ACTION							
PSI LSI ADJ.							
B. Remarks and Authentication / / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE. SIGNATURE <i>[Signature]</i> DATE <i>25 Feb 64</i> PAY CHANGE NOTIFICATION							

Form 9-61 560

Obsolete Previous Edition

(4-51)

**SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE AND STEP AS INDICATED IN CHART BELOW.**

[illegible]



IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI  
MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS,  
EFFECTIVE 5 JANUARY 1964.

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
GOODPASTURE ANN L	057303	51	700	CF GS 13 3	\$11,880	\$12,495

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
057303		GOODPASTURE ANN L		64 700 CF 8						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS 13	2	\$11,515	11/11/62	GS 13	3	\$11,880	11/10/63			
8. Remarks and Authentication										
// NO EXCESS LWOP // IN PAY STATUS AT END OF WAITING PERIOD // LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE: <u>E. E. Hill</u> DATE: <u>11/20/63</u>										
PAY CHANGE NOTIFICATION										

LLG: 9 NOV. 62

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																			
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)																	
057303		GOODPASTURE ANN L																	
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT													
PROMOTION				11 11 62		REGULAR													
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY											
		CF TO V		X		CF TO CF		3135 5700 1000		50 USC 403 J									
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION													
DDP WH BRANCH 3 MEXICO CITY, MEXICO STATION						MEXICO CITY, MEXICO													
11. POSITION TITLE						12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION											
OPS OFFICER						0852		D											
14. CLASSIFICATION SCHEDULE (GS, LO, etc)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE											
GS				0136.01		13 2		11515											
18. REMARKS																			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																			
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. Hdqrs. Code		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI			
22		10		64700 WH		45075				3		11 28 18		11 11 62		11 11 62			
28. NTC EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO.		34. SER							
MO. DA. YR.				1 - CSC 2 - FICA 3 - NONE		CODE		TYPE MO. DA. YR.		EOD DATA									
35. VET. PREFERENCE		36. SERV. COMP DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY		39. PEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.									
CODE		0 - NONE 1 - 6 PT 2 - 10 PT		MO. DA. YR.		NO DA YR		CAR RESV PROV TEMP		CODE		CODE		0 - WAIVER 1 - YES		HEALTH INS CODE			
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA									
CODE				0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)		FORM EXECUTED 1 - YES 2 - NO		NO TAX EXEMPTIONS				FORM EXECUTED 1 - YES 2 - NO				CODE NO TAX STATE CODE EXEMP.			
SIGNATURE OR OTHER AUTHENTICATION												POSTED							
												11/19/62 ZK							

FORM 4-62 1150

Use Previous Edition

SECRET

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

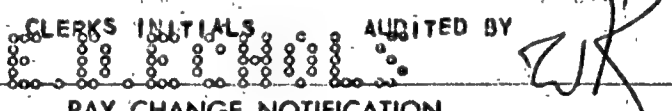
(When Filled In)

ceq 11/16/62

LOC

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 793 AND  
 DCI MEMORANDUM DATED 1 AUGUST 1954, SALARY IS ADJUSTED AS FOLLOWS:  
 EFFECTIVE 14 OCTOBER 1952

NAME	SERIAL	ORGN	FUNDS	OLD GR-ST	OLD SALARY	NEW GR-ST	NEW SALARY
GOODPASTURE ANN L	057303	64700	CF	12 5	\$ 9995	12 5	\$10735

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
057303		GOODPASTURE ANN L		64 700 CF 8						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last EN Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADI
GS 12	4	\$ 9,735	03/19/61	GS 12	5	\$ 9,995	09/16/62			
8. Remarks and Authorization										
<p style="text-align: right;">4 559</p> <p> <input checked="" type="checkbox"/> NO EXCESS LWOP    <input type="checkbox"/> EXCESS LWOP  <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD  <input checked="" type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD </p> <p>           CLERKS INITIALS    AUDITED BY   </p>										
PAY CHANGE NOTIFICATION										

**SECRET**  
(When Filled In)

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours					
557303		GOODPASTURE ANN L		DDP/WH 8 UV							
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION			
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.	
GS	12	3	\$ 9,475	09/20/59	12	4	\$ 9,735	03/19/61			
8. Remarks and Authentication											
<p>✓ / NO EXCESS LWOP</p> <p>✓ / IN PAY STATUS AT END OF WAITING PERIOD</p> <p>✓ / IN LWOP STATUS AT END OF WAITING PERIOD</p> <p align="center"><b>RECEIVED</b> <span style="float: right;">WK</span></p> <p align="center"><b>PAY CHANGE NOTIFICATION</b></p>											

Form 560

Obsolete Previous Edition

**SECRET**

(4-51)

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED  
1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
DI	GOODPASTURE ANN L	557303	46 52	GS-12 3	\$ 8,810	\$ 9,475

/S/ EMMETT D. ECHOLS  
DIRECTOR OF PERSONNEL

**SECRET**  
(WHEN FILLED IN)

1. LMP. SERIAL NO.		2. NAME			3. ASSIGNED CPGAN		4. FUNDS		5. ALLOTMENT				
557303		GOODPASTURE ANN L			DDP/WH 8		UV						
6. OLD SALARY RATE						7. NEW SALARY RATE							
GRADE		STEP	SALARY	LAST EFFECTIVE DATE			GRADE		STEP	SALARY	EFFECTIVE DATE		
				MO.	DA.	YR.					MO.	DA.	YR.
GS 12		2	\$ 8,570	03	23	58	GS 12		3	\$ 8,810	09	20	59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER													
8. CHECK ONE <input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP							9. NUMBER OF HOURS LWOP						
IF EXCESS LWOP, CHECK FOLLOWING:							10. INITIALS OF CLERK						
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD							11. AUDITED BY						
<input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD													
TO BE COMPLETED BY THE OFFICE OF PERSONNEL													
12. PROJECTED SALARY RATE AND EFFECTIVE DATE							13. REMARKS						
GRADE		STEP	SALARY	MO.	DA.	YR.	<div style="font-size: 2em; opacity: 0.5; position: absolute; top: 0; right: 0; transform: rotate(-15deg);"> C E </div> <div style="position: absolute; top: 40px; right: 40px;"> 4 559 RF RB 9/21/59 </div>						
14. AUTHENTICATION													
C. M. STEWART													
PERIODIC STEP INCREASE - AUTHENTICATION													

FORM NO 560a  
1 MAR. 58

**SECRET**

PERSONNEL FOLDER

(4)



00000

S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE  
12 JANUARY 1959 AUTHORIZED BY P. L. 85-1462 AND DCI  
DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
GOODPASTURE ANN L	557303	GS-12-2	\$ 7,785	\$ 8,570

GORDON M. STEWART  
/S/ DIRECTOR OF PERSONNEL

S E C R E T

**SECRET**  
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME				3. ASSIGNED ORGAN.		4. FUNDS		5. ALLOTMENT	
557303		GOODPASTURE ANN L				DDP/WH		UV			
6. OLD SALARY RATE						7. NEW SALARY RATE					
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
			MO	DA	YR.				MO	DA	YR.
12	1	\$ 7,570	09	23	56	12	2	\$ 7,785	03	23	58
TO BE COMPLETED BY THE OFFICE OF COMPTROLLER											
9. CHECK ONE <input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP					
IF EXCESS LEAVE LWOP, CHECK FOLLOWING:						10. INITIALS OF CLERK					
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD						11. AUDITED BY					
<input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD											
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	MO.	DA.	YR.	<div style="position: relative; height: 100px;"> <span style="position: absolute; top: 0; right: 0; font-size: 2em; transform: rotate(-15deg); opacity: 0.5;">SECRET</span> <div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); font-size: 1.5em;">4 377420 4705</div> <div style="position: absolute; bottom: 0; right: 0; font-size: 1.2em;">3/23/58 in</div> </div>					
14. AUTHENTICATION											
<div style="position: relative; height: 100px;"> <span style="position: absolute; top: 0; right: 0; font-size: 2em; transform: rotate(-15deg); opacity: 0.5;">SECRET</span> </div>											
PERIODIC STEP INCREASE - AUTHENTICATION											

FORM NO 5600  
1 MAR. 56

**SECRET**

PERSONNEL FOLDER

(4)

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

270

1. NAME (MR - MISS - MRS - ONE GIVEN NAME, INITIALS, AND SURNAME) <b>MISS ANN L. GOODPASTURE 157303</b>		2. DATE OF BIRTH <b>28 Nov 1918</b>	3. JOURNAL OR ACTION NO.	4. DATE <b>13 November 56</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>REASSIGNMENT 56</b>		6. EFFECTIVE DATE <b>18 Nov 1956</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>50 USCA 403 J</b>	
FROM <b>BE-27-12 GS-0136.51-12 \$7570.00 per annum</b>		TO <b>TO (FI) BE-571 GS-0136.51-12 \$7570.00 per annum</b>		
9. SERVICE, SERIES, GRADE, SALARY		10. ORGANIZATIONAL DESIGNATIONS <b>DDP/NSA FI Staff</b>		
11. HEADQUARTERS <b>501600</b>		12. FIELD OR DEPT'L <b>Washington, D. C.</b>		
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE NONE <input checked="" type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> BILAS <input type="checkbox"/> OTHER <input type="checkbox"/>		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/> <b>SD-DI</b>		
15. SEX <b>F</b>	16. APPROPRIATION FROM: <b>7-3300-00</b> TO: <b>750-13</b>	17. SUBJECT TO C. S. RETIREMENT ACT (YES NO) <b>Yes</b>	18. DATE OF APPOINTMENT AFFIDAVITS (EXCEPTIONS ONLY)	19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>STATE</b>
20. REMARKS:  <b>3 NOV 09/18/47</b>  <div style="border: 1px solid black; padding: 5px; display: inline-block; transform: rotate(-5deg);"><b>FOBIED</b> <i>L. G. G. G.</i></div>				
ENTRANCE PERFORMANCE RATING: <b>Director of Personnel</b> <b>H A S E R</b>				

4. PERSONNEL FOLDER COPY

7-11/14/56

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR - MISS - MRS - ONE GIVEN NAME, INITIALS, AND SURNAME) <b>MISS ANN L. GOODPASTURE 157303</b>		2. DATE OF BIRTH <b>28 Nov 1918</b>	3. JOURNAL OR ACTION NO.	4. DATE <b>20 Sep 1956</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>PROMOTION 30</b>		6. EFFECTIVE DATE <b>23 Sep 56</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>50 USCA 403 j</b>	
FROM <b>BB-28</b> <b>GS-0136.51-11 \$6605.00 per annum</b>		TO <b>BB-27-12</b> <b>GS-0136.51-12 \$7570.00 per annum</b>		
8. POSITION TITLE		9. SERVICE, SERIES, GRADE, SALARY		
10. ORGANIZATIONAL DESIGNATIONS <b>501600</b>		11. HEADQUARTERS <b>2</b>		
12. FIELD OR DEPT'L <input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		13. VETERAN'S PREFERENCE <input checked="" type="checkbox"/> NONE <input type="checkbox"/> WWII <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10 POINT		
14. POSITION CLASSIFICATION ACTION <input type="checkbox"/> NEW <input type="checkbox"/> VICE <input type="checkbox"/> L. A. <input type="checkbox"/> REAL		15. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)		
16. APPROPRIATION FROM: <b>7-3300-20</b> TO: <b>Same</b>		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <b>Yes</b>		
18. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:		19. REMARKS:  <b>3 BOD 09/18/57</b>		
<div style="border: 1px solid black; padding: 5px; text-align: center;"> <b>POSTED</b>  <i>Hand 25 Sept 56</i> </div>				
ENTRANCE PERFORMANCE RATING: <b>Director of Personnel</b>				

4. PERSONNEL FOLDER COPY

Combined Personnel Action

S-E-C-R-E-T

Page 2 of 43 pages

Vouchered to VoucheredAllotment No. 7-3300-20

Used in lieu of SF-52 and SF-50 to document actions involving the movement of employees into current NEA Division T.O. Positions in accordance with T.O. authorization No. 972 approved 25 June 1956, and effective 29 July 1956.

Headquarters

<u>Serial No.</u>	<u>Name</u>	<u>Position Number</u>	<u>Occupational Series</u>	<u>Organ. Code</u>	<u>Organizational Title</u>
					FOREIGN INTELLIGENCE STAFF
	Kaiser, Minnie, R.	BE-27	GS-0136.51-13		I.O. FI
	Morgan, D. Kathryn	BE-28	GS-0136.51-09		I.O. FI
	Goodpasture, Ann, L.	BE-28	GS-0136.51-11		I.O. FI
	Parish, Johnny, E.	BE-357	GS-0132.44-07		REPORTS OFFICER
	Steele, Belle, S.F.	BE-329	GS-0301.28-07		Intelligence Assistant
	Carlson, Mabel	BE-29	GS-0322.01-06		Clerk Typist
	Chandler, Delores, A.	BE-404	GS-0322.01-05		Clerk Typist
	Leidy, Mildred	BE-38911	GS-0322.01-05		Clerk Typist

Approved: James E. S.

NEA Division

Date 5/14/56Joseph S. Reff  
Records & Services Division  
Office of PersonnelDate 22 July 56

S-E-C-R-E-T

CENTRAL INTELLIGENCE AGENCY

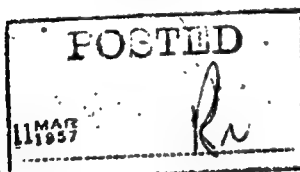
NOTIFICATION OF PERSONNEL ACTION

171

1. NAME (MR - MISS - MRS - ONE GIVEN NAME, INITIALS) AND SURNAME		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Miss Ann L. Goodpasture 557393		28 Nov 1918		7 Mar 1957
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Reassignment 06		BOB 10 Mar 1957	50 USCA 403.1	
FROM		TO		
10 (FI) EE-572 GS-0136.51-12 \$7570.00 per annum DDP/SEA FI Staff  Washington, D. C.  <input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		8. POSITION TITLE  9. SERVICE, SERIAL, GRADE, SALARY  10. ORGANIZATIONAL DESIGNATIONS 465250  11. HEADQUARTERS 5  12. FIELD OR DEPT'L  1. O. (FI) BAF-400 GS-0136.51-12 \$7570.00 per annum DDP/WH Branch III Mexico City, Mexico Station  Mexico City, Mexico  <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION		
NONE <input type="checkbox"/> DDW <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT <input type="checkbox"/> 10 POINT <input type="checkbox"/>		NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/>		
15. SEX F		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes		18. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)
16. APPROPRIATION FROM: 7-3300-20 450-75 TO: 7-3570-55-060		19. LEGAL RESIDENCE AD/WT <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:		

20. REMARKS:

Subject to approved medical clearance prior to being sent overseas.



3 EOD 09/18/47

"Transfer TO Unvouchered funds FROM Vouchered funds."

ENTRANCE PERFORMANCE RATING:

Director of Personnel

SIGNATURE OR OTHER AUTHENTICATION

4. PERSONNEL FOLDER COPY

U. S. GOV

## 141

#### 4. PERSONNEL FOLDER COPY

# PERIODIC STEP INCREASE CERTIFICATION

**CONFIDENTIAL**  
(When Filled In)

U. S. GOVERNMENT PRINTING OFFICE: 1954-220030

1. Agency and organizational designation		2. Payroll period		3. Block No. 6-3600-20		4. Slip No.	
5. Employee's name (and social security account number when appropriate) <b>GOODPASTURE, Ann L.</b>				6. Grade and salary <b>GS-11 \$6390.00</b>			
PAYROLL CHANGE DATA							
	BASE PAY	OVERTIME	GROSS PAY	RET.	FEDERAL TAX	BOND	NET PAY
7. Previous normal							
8. New normal							
9. Pay this period							
10. Remarks <i>RECEIVED 12/1/55</i>				11. Authorization <b>WE 1</b>		12. Prepared by <b>11-8-55</b>	
						13. Audited by	
<input checked="" type="checkbox"/> Periodic step increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step increase							
14. Effective date <b>1 Jan 56</b>	15. Date last equivalent increase <b>1 Jul 54</b>	16. Old salary rate <b>\$6390.00</b>	17. New salary rate <b>\$6605.00</b>	18. Performance by employee satisfactory or better? <b>ARE SATISFACTORY</b>			
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods) Period(s):				(Choose applicable box in case of excess LWOP) <input type="checkbox"/> No excess LWOP. Total excess LWOP: _____ <input type="checkbox"/> Excess LWOP. Total excess LWOP: _____ (Specify period(s) at end of waiting period.)			
STANDARD FORM NO. 1126a—Revised				<b>CONFIDENTIAL</b> PAYROLL CHANGE SLIP — PERSONNEL COPY			
Form prescribed by Comp. Gen., U. S. October 26, 1954, General Regulations No. 102							



CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

dah

1. NAME (MR., MISS, MRS., OR MS. GIVEN NAME, INITIAL(S), AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE																		
Miss Ann L. Goodpasture		28 Nov 1913		21 Oct 1955																		
This is to notify you of the following action affecting your employment:																						
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY																			
Reassignment		23 Oct 1955	50 USCA 403 j																			
FROM		TO																				
Para-Mil. Off. SB-101-11 GS-0136.11-11 \$6390.00 Per Annum  French Branch, FI, PP, EM		Operations Off. (GE) SB-574-11 GS-0132.52-11 \$6390.00 Per Annum  DDB/WE FI Staff Counter Espionage Section  Washington, D.C.																				
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL																				
13. VETERAN'S PREFERENCE		14. POSITION CLASSIFICATION ACTION																				
<table border="1"> <tr> <td>None</td> <td>WWII</td> <td>OTHER</td> <td>5-PT.</td> <td>10-POINT</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		None	WWII	OTHER	5-PT.	10-POINT						<table border="1"> <tr> <td>NEW</td> <td>VICE</td> <td>I. A.</td> <td>REAL</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>			NEW	VICE	I. A.	REAL				
None	WWII	OTHER	5-PT.	10-POINT																		
NEW	VICE	I. A.	REAL																			
15. SEX F		SD/DI																				
16. APPROPRIATION FROM: 6-3600-20 TO: Same		17. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) Yes																				
18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)		19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:																				
20. REMARKS:																						

POSTED  
31 OCT 1955

ENTRANCE PERFORMANCE RATING:

Director of Personnel

21. SIGNATURE OR OTHER AUTHENTICATION

4. PERSONNEL FOLDER COPY

113 10/24/55

**CENTRAL INTELLIGENCE AGENCY**

~~CONFIDENTIAL~~

#### 4. PERSONNEL FOLDER COPY

☆ U. S. GOVERNMENT PRINTING OFFICE: 1894-913:238

SECRET
789 MK  
12/14/54  
Sum

STANDARD FORM 52. <small>PROCESSED BY THE U. S. CIVIL SERVICE COMMISSION WASHINGTON, D. C. 20535 GSA GEN. REG. NO. 27 MAY 1962 EDITION GSA GEN. REG. NO. 27</small>		<b>REQUEST FOR PERSONNEL ACTION</b>		UNVOUCHERED	
<b>REQUESTING OFFICE:</b> Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.					
1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname) <b>MISS ANN L. GOODPASTURE</b>		2. DATE OF BIRTH <b>28 Nov. 1918</b>		3. REQUEST NO. 	
4. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>REASSIGNMENT</b>		5. EFFECTIVE DATE A. PROPOSED: 		6. C. S. OR OTHER LEGAL AUTHORITY 	
7. POSITION (Specify whether establish, change grade or title, etc.) 		8. FROM— <b>Intelligence Officer (FI) BA(P) 8087</b> <b>GS-0136.51-11 \$5940 per annum</b> <b>DDP/WH</b> <b>Project PBSUCCESS</b> <b>Washington, D. C.</b> <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		9. TO— <b>Area Ops Off. BEF 387</b> <b>GS-0136.01-11 \$5940 p a</b> <b>DDP/NEA</b> <b>India Pakistan Afghanistan Br.</b> <b>New Delhi, India</b> <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	
10. REMARKS (Use reverse if necessary) <b>Grade of position BEF 387 is GS-12.</b>					
11. REQUESTED BY (Name and title) <b>THOMAS J. HESTER, NEA/ADM/PERSONNEL</b>			12. REQUEST APPROVED BY Signature: <i>James P. Humphries (WRM)</i> Title: <i>FI/CMO 23 Nov '54</i>		
13. VETERAN PREFERENCE NONE <input type="checkbox"/> WWII <input type="checkbox"/> OTHER <input type="checkbox"/> S-P.T. <input type="checkbox"/> 10-POINT <input type="checkbox"/> <input checked="" type="checkbox"/> I certify Funds Available:			14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input type="checkbox"/> SD:FI		
15. SEX <input type="checkbox"/> M <input checked="" type="checkbox"/> F 16. RACE <input type="checkbox"/> W <input checked="" type="checkbox"/> F			17. APPROPRIATE FROM: <b>Charge Alt. 5-3500-51-001</b> TO: <b>Ant. for NEA/IS 5-3340-55-013</b>		
18. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY) 			19. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>OKLA.</b>		
20. STANDARD FORM 52 REMARKS: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><i>concerned by Asst. Dir. 12-10-54</i></p> <p><i>12-13-54</i></p> <p><i>Employee</i></p> <p><i>E Date OK'd 12/14/54</i></p> <p><i>per 3 c/o Neal. VOA</i></p> </div> <div style="width: 50%;"> <p style="text-align: center;">OFFICE/DIVISION WITHIN CEILING</p> <p style="text-align: center;">12/10</p> <p style="text-align: center;">Date</p> <p style="text-align: center;">Post. for Con. Ctr.</p> </div> </div>					
21. CLEARANCES A. B. CEIL. OR PCS. CONTROL C. CLASSIFICATION D. PLACEMENT OR ENPL. E.		INITIAL OR SIGNATURE 		DATE 	
F. APPROVED BY <i>Forrest P. Rouse</i>		REMARKS <div style="border: 2px solid black; padding: 5px; display: inline-block;"> <b>POSTED</b>  <b>12/17/54</b>  <i>JB</i> </div>		SIGNATURE <i>A. Busby</i>	

STANDARD FORM 52  
ISSUED BY THE  
U. S. CIV. SERVICE COMMISSION  
JANUARY 1953 - PERSONNEL  
MANUAL CHAPTER III

SECRET

7/14/54  
6/24/54  
Sam

# REQUEST FOR PERSONNEL ACTION

CONFIDENTIAL FUNDS

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 68 and 7 unless otherwise instructed.  
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr - Miss - Mrs - One given name, middle initial, and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
Miss Ann L. Goodpasture	28 Nov. 1913		10 June 1954
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) Promotion		6. EFFECTIVE DATE A. PROPOSED	7. C. S. OR OTHER LEGAL AUTHORITY
B. POSITION (Specify whether established, change grade or title, etc.)		B. APPROVED July 5-4	
FROM: Intelligence Officer (FI) BA(P)-903 GS-0136.51-9 \$5435 per annum DDP/AM Project PBSUCCESS Washington, D.C. <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	8. POSITION TITLE AND NUMBER 9. SERVICE, GRADE, AND SALARY 10. ORGANIZATIONAL DESIGNATIONS 11. HEADQUARTERS 12. FIELD OR DEPARTMENTAL	TO: Intelligence Officer (FI) BA(P) 8085 GS-0136.51-11 \$5940 per annum DDP/AM Project PBSUCCESS Washington, D.C. <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	

A. REMARKS (Use reverse if necessary)	
B. REQUESTED BY (Name and title) P. C. BOWERS, Personnel Officer	
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) Marion Mazuzan, X-4161	
D. REQUEST APPROVED BY Signature: <i>Howard J. Preston</i> Title: Administrative Officer, PBS	
13. VETERAN PREFERENCE NONE <input checked="" type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5 PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> DISAB. OTHER <input type="checkbox"/>	14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L. A. <input type="checkbox"/> REG. <input type="checkbox"/> CD-FI
15. SEX <input checked="" type="checkbox"/> F <input type="checkbox"/> M 16. RACE <input checked="" type="checkbox"/> W <input type="checkbox"/> O 17. APPROPRIATION FROM: 4-3500-51-081 TO: 4-3500-51-081	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <input type="checkbox"/> 19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSARY ONLY) 20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: OKLAHOMA

21. STANDARD FORM 50 REMARKS  
This action also corrects Reassignment notification dated 4 Dec. 53, to show the correct salary, previously shown as \$5310.00 per annum.

APPROVED BY  
DATE: JUN 21 1954

POSTED  
6/21/54

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL		6/23	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.		23 June 54	
E.			
F. APPROVED BY <i>Howard J. Preston</i>			

SECRET

10-57220-6

## S E C R E T

COMBINED PERSONNEL ACTION  
UNVOUCHERED TO UNVOUCHERED

USED IN LINE OF SF-52 TO DOCUMENT PERSONNEL ACTIONS INVOLVING THE MOVEMENT OF EMPLOYEES INTO CURRENT T/O POSITIONS AND REFLECT CHANGES IN TITLE AND/OR ADDING SIX DIGIT CLASS SERIES NUMBERS.

DATE OF T/O APPROVAL: 29 April 1954

EFFECTIVE DATE OF ACTION: 23 May 1954

DDP/WH  
PROJECT PESUCCESS

Name	FROM Title	Code/Grade	Pos No.	TO Title	Code/Grade	Pos No.
<b>WASHINGTON HEADQUARTERS</b>						
PRESTON, Howard J.	Admin Off.	GS-0301.01-15	BAP-29	Admin Off.	GS-0301.03-15	BAP-8002
DUDLEY, Thomas J.	Fin. Ops. Off.	GS-0510.15-12	BAP-30	Fin. Ops. Off.	GS-0510.15-12	BAP-8003
SHORMAKER, M. P.	Log. Off.	GS-2010.01-12	BAP-31	Log. Off.	GS-2010.01-12	BAP-8004
BOWERS, Philip C.	Personnel Off.	GS-0201.01-11	BAP-32	Personnel Off.	GS-0201.01-11	BAP-8008
BERTRAND, Eileen A.	Dispatch Anal.	GS-0305.12-7	BAP-33	Dispatch Anal.	GS-0305.12-7	BAP-8011
STONE, Cynthia H.	Clerk Typist	GS-0322.01-5	BAP-35	Clerk Typist	GS-0322.01-5	BAP-8014
HARRISON, Cynthia M.	Clerk Steno	GS-0312.01-4	BAP-36	Clerk Steno	GS-0312.01-4	BAP-8015
<b>STATION LINCOLN</b>						
HANEY, Albert R.	Ops Off (Ch, FI)	GS-0132.06-15	BAP-1	Ops Off, PP	GS-0136.31-15	BAP-8016
HOBBING, Enno R.	Ops Off (Dep Ch)(PP)	GS-0136.31-14	BAP-2	Ops Off, PP	GS-0136.31-14	BAP-8018
DOUGHERTY, John S.	Ops Officer	GS-0132.06-13	BAP-3	Intel Off (FI)	GS-0136.51-13	BAP-8019
JACOBSON, Harry G.	Ops Officer	GS-0132.06-13	BAP-4	Intel Off (FI)	GS-0136.51-13	BAP-8020
NOLAN, William F.	Air Ops Off	GS-0136.16-13	BAP-13	Air Ops Off	GS-0136.16-13	BAP-8021
KING, Michael J.	Fiscal Acct	GS-0501.03-11	BAP-11	Fiscal Acct. Asst.	GS-0501.03-11	BAP-8022
STEWART, Jack	Intel Off (FI)	GS-0132.06-9	BAP-12	Intel Off (FI)	GS-0136.51-9	BAP-8023
BAUMAN, Jack McV.	Invest. (Gen)	GS-1810-12	BAP-18	Security Off.	GS-1810.01-12	BAP-8024
ROCKETT, Alice E.	Reports Off.	GS-0132.44-9	BAP-6	Reports Off.	GS-0132.44-9	BAP-8025
SANCHEZ, Nestor D.	Intel Off (FI)	GS-0132.06-11	BAP-23	Intel Off (FI)	GS-0136.51-11	BAP-8028
STARK, Robert L.	Sec. Ops. Off.	GS-1810.03-10	BAP-24	Security Off	GS-1810.01-10	BAP-8029

S E C R E T

SECRET

Page 2

DDP/WH  
PROJECT PASUCCESS

Name	FROM Title	Code/Grade	TO Pos No. Title	Code/Grade	Pos No.
STATION LINCOLN (Continued)					
Trotter, Carl E.	Intel Asst	GS-0301.22-7	BAP-9 Intel Asst	GS-0301.35-7	BAP-8031
Ebert, Louis V.	Intel Off (FI)	GS-0132.06-7	BAP-10 Intel Off (FI)	GS-0132.51-7	BAP-8032
GOODPASTURE, Ann L.	Intel Off (FI)	GS-0132.06-9	BAP-13 Intel Off (FI)	GS-0132.51-9	BAP-8033
CANN, Ruth E.	Trng Instr (F.L.)	GS-1710.04-9	BAP-25 Trng Instr (F.L.)	GS-1710.04-9	BAP-8034
MIRUS, Lucille V.	Admin Asst	GS-0301.02-7	BAP-19 Admin Asst	GS-0301.02-7	BAP-8037
BRENNAN, Raymond J.	Admin Asst	GS-0301.02-7	BAP-46 Admin Asst	GS-0301.02-7	BAP-8038
MORRIS, Dorothy J.	Secretary	GS-0318.03-7	BAP-27 Secretary	GS-0318.03-7	BAP-8039
MAGGARD, Peggy M.	Secretary (Gen)	GS-0318.03-7	BAP-14 Secretary	GS-0318.03-7	BAP-8040
OYLES, Mary C.	Secretary (Gen)	GS-0318.03-4	BAP-16 Secretary	GS-0318.03-4	BAP-8041
WEBER, Lydia F.	Secretary (Gen)	GS-0318.03-6	BAP-15 Secretary	GS-0318.03-6	BAP-8042
KEIRSTEAD, Rosemary J.	Secretary (Gen)	GS-0318.03-4	BAP-21 Secretary	GS-0318.03-4	BAP-8043
BROWNIE, Mariel F.	Secretary	GS-0318.03-4	BAP-22 Secretary	GS-0318.03-4	BAP-8045
LOVELL, Nancy J.	Secretary (Gen)	GS-0318.03-4	BAP-12 Secretary	GS-0318.03-4	BAP-8046
CONNELLY, Jean	Secretary (Gen)	GS-0318.03-4	BAP-20 Secretary	GS-0318.03-4	BAP-8047
BEYERS, Barbara C.	Secretary	GS-0318.03-5	BAP-28 Secretary	GS-0318.03-5	BAP-8048
DALRYMPLE, Joan	Secretary (Steno)	GS-0318.01-5	BAP-49 Secretary (Steno)	GS-0318.01-5	BAP-8049
ADAMES, Hilda	Clerk Typist (Sp)	GS-0322.01-4	BAP-45 Clerk Typist	GS-0322.01-4	BAP-8051
KUNZ, Laureen M.	Secretary (Typ)	GS-0318.02-4	BAP-47 Secretary (Typ)	GS-0318.02-4	BAP-8052
HENNESSEY, Geraldine C.	Clerk Steno	GS-0312.01-4	BAP-50 Clerk Steno	GS-0312.01-4	BAP-8053
FJHOPEFUL					
STULLER, Thomas L.	Supply Off	M.Sgt	BAP-53 Supply Off.	M/Sgt	BAP-8056
SANDY, James M.	Mod Tech (Gen)	GS-0645.01-9	BAP-55 Mod Tech (Gen)	GS-0645.01-9	BAP-8058
KENNEY, Edward T.	Supply Clerk	GS-2040.5	S-71 Supply Asst	GS-2001.01-5	BAP-8059
WASHINKO, John	Admin Asst	GS-7	S-59 Admin Asst	GS-0301.02-7	BAP-8060

APPROVED BY:

SECRET

*Joseph S. Ruff*

GOVERNMENT PRINTING OFFICE: 1952 - 557574

1. Agency and organizational designation		4. Pay		5. Basic Pay		6. Step Pay	
3. Employee's name (and social security account number when appropriate)		5. Grade and salary		6. Basic Pay		7. Step Pay	
GOODPASTER, Ann T.		GS-2 \$5310		UV			
<b>PAY-ROLL CHANGE DATA</b>							
	BASE PAY	OVERTIME		GROSS PAY	RET.	TAX	NET PAY
7. Previous normal							
8. New normal							
9. Pay this period							
10. Remarks				11. Appropriation(s)		12. Prepared by	
				DDF/WH 8		mk 27 Nov. 53	
						13. Audited by	
<input checked="" type="checkbox"/> Periodic step increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step increase <input type="checkbox"/>							
14. Effective date	15. Date last equivalent increase	16. Old salary rate	17. New salary rate	18. Performance rating is satisfactory or better.			
31 Jan 54 1 Feb 53		\$5310	\$5435				
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods):				(Check applicable box in case of excess LWOP)			
<input type="checkbox"/> No excess LWOP    Total excess LWOP				<input checked="" type="checkbox"/> stop end of working period <input type="checkbox"/> stop at end of period <input type="checkbox"/> stop at end of period			
STANDARD FORM NO. 1126d—Revised Form prescribed by Comp. Gen., U.S. Nov. 8, 1950, General Regulations 11a, 102				PAY ROLL CHANGE SLIP—PERSONNEL COPY			

STANDARD FORM 52 FORM 52-1 (Rev. 1-54) JANUARY 1954 - EDITION BUREAU OF PERSONNEL		UNVOUCHERED	
<b>REQUEST FOR PERSONNEL ACTION</b>			
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr., Mrs., Miss, One given name, initials, and surname) <b>Miss Ann L. GOODPASTURE</b>		2. DATE OF BIRTH <b>28 Nov. 1918</b>	3. REQUEST NO. <b>-</b>
4. DATE OF REQUEST <b>4 Dec 53</b>		5. EFFECTIVE DATE A. PROPOSED: <b>FEB 14 1954</b>	
6. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Reassignment</b>		7. C. S. OR OTHER LEGAL AUTHORITY	
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED: <b>FEB 14 1954</b>	
FROM: <b>INTEL OFCR, BA-182</b> <b>GS-132-9, \$5310.00 p.a.</b> <b>DDP/WH</b> <b>Monterrey, Mexico</b>		TO: <b>INTEL OFFICER (FI)</b> <b>GS-0132.06-9, \$5310.00 p.a.</b> <b>DDP/WH</b> <b>PROJECT PBSUCCESS</b>	
9. POSITION TITLE AND NUMBER		10. SERVICE, GRADE, AND SALARY	
11. ORGANIZATIONAL DESIGNATIONS		12. FIELD OR DEPARTMENTAL	
13. FIELD <input checked="" type="checkbox"/> DEPARTMENTAL <input type="checkbox"/>		14. FIELD <input checked="" type="checkbox"/> DEPARTMENTAL <input type="checkbox"/>	
A. REMARKS (Use reverse if necessary) <b>Slot #13</b> <b>Presently at hqtrs.</b> <i>* With established record per information 15 Dec 53.</i>			
B. REQUESTED BY (Name and title) <i>For Washington</i>		D. REQUEST APPROVED BY Signature: <i>Dennis B. Powell</i>	
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension) <b>V. C. LYNCH, X-457</b>		Title: <b>F1/C400</b>	
13. VETERAN PREFERENCE NONE <input checked="" type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10 POINT <input type="checkbox"/> DISAB. OTHER		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/> <b>CD: FI</b>	
15. SEX <input checked="" type="checkbox"/> M <input type="checkbox"/> F	16. RACE <input checked="" type="checkbox"/> W <input type="checkbox"/> O	17. APPROPRIATION FROM: <b>4-3570-55-060</b> TO: <b>4-3500-51-081</b>	18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) <input type="checkbox"/>
19. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)		20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:	
21. STANDARD FORM 50 REMARKS <i>transferred 2 Feb. yr.</i> <i>2-3-54</i> <i>12-11-54</i> <b>FOC-ED</b> <b>VRD 2/19/54</b>			
22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL OR POS. CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.			
E.			
F. APPROVED BY <i>Wm. on Schade</i> <i>OK Humphrey</i>			



STANDARD FORM 52 PROPOSED BY THE U. S. CIVIL SERVICE COMMISSION JANUARY 1949 - FEDERAL PERSONNEL MANUAL, CHAPTER II		SECRET UNCLASSIFIED	
REQUEST FOR PERSONNEL ACTION			
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)		2. DATE OF BIRTH	
Miss Anna L. GOODPASTURE		28 Nov. 1918	
3. REQUEST NO.		4. DATE OF REQUEST	
		30 Nov. 53	
5. NATURE OF ACTION REQUESTED. A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		6. EFFECTIVE DATE A. PROPOSED:	
Conversion from FSS Status		Oct 12 Oct 53*	
B. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED:	
		Oct 13 Oct 53	
FROM— Administrative Assistant, FSS-9 Intell Officer RA-182 FSS-9 \$4470.00 65-132-4 45310.00 DDP/MH Monterrey, Mexico		TO— INTELL OFFICER RA-182 GS-132-9 \$5310.00 DDP/MH Monterrey, Mexico	
8. POSITION TITLE AND NUMBER		9. SERVICE, GRADE, AND SALARY	
10. ORGANIZATIONAL DESIGNATIONS		11. HEADQUARTERS	
12. FIELD OR DEPARTMENTAL		12. FIELD OR DEPARTMENTAL	
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL		<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	
A. REMARKS (Use reverse if necessary)			
RA-182 *Resigned from State in field.			
B. REQUESTED BY (Name and title)		D. REQUEST APPROVED BY	
V. C. Lynch YL57		Signature: Davis B. Powell	
C. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)		Title: FICNO	
13. VETERAN PREFERENCE		14. POSITION CLASSIFICATION ACTION	
NONE WWII OTHER S-PT. 10-POINT DISAB. OTHER		NEW VICE I. A. REAL CD-FI	
15. SEX RACE		17. APPROPRIATION	
7 W		FROM: 3592-00-000 4-3570-55-060 TO: 3522-00-000 Sancl	
18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)		19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	
		10-5-53	
20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:			
21. STANDARD FORM 50 REMARKS			
22. CLEARANCES			
A.		INITIAL OR SIGNATURE	
B. CEIL OR POS CONTROL		DATE	
C. CLASSIFICATION		REMARKS:	
D. PLACEMENT OR EMPL.			
E.			
F. APPROVED BY			

STANDARD FORM 52 OFFICE OF THE SECURITY INFORMATION CHAPTER 11		SECRET SECURITY INFORMATION UNVOICED	
<b>REQUEST FOR PERSONNEL ACTION</b>			
REQUESTING OFFICE: Fill in Items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.			
1. NAME (Mr., Miss, Mrs., One given name, initial(s), and surname)	2. DATE OF BIRTH	3. REQUEST NO.	4. DATE OF REQUEST
Miss Ann L. Goodpasture	28 Nov 1918		7 Mar 1953
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.)		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
Reassignment			
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED:	
		29 Mar 53 ME	
FROM— (Adm Assistant) Intell Ofcr (Ops) (FSS-9 \$4470.00) GS-9 \$5310.00 DDP WH Monterrey, Mexico	9. POSITION TITLE AND NUMBER 10. SERVICE, GRADE, AND SALARY 11. ORGANIZATIONAL DESIGNATIONS 12. HEADQUARTERS	TO— (Adm Assistant) INTELL OFFICER BA-182 (FSS-9 \$4470.00) GS-132-9 \$5310.00 DD/P WH III Monterrey, Mexico	
<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	
13. REMARKS (Use reverse if necessary)			
BA-182			
14. REQUESTED BY (Name and title)		15. REQUEST APPROVED BY	
V. C. LYNCH X-457		Signature: Edward C. Mc Kanara	
16. FOR ADDITIONAL INFORMATION CALL (Name and telephone extension)		Title: for FI/PO	
17. VETERAN PREFERENCE		18. POSITION CLASSIFICATION ACTION	
NONE WH/1 OTHER 5-PT. 19 POINT DISAB OTHER		NEW VICE I.A. REAL	
19. SEX RACE	20. APPROPRIATION	21. SUBJECT TO C.S. RETIREMENT ACT (YES-NO)	22. DATE OF APPOINT- MENT AFFIDAVITS (ACCESSIONS ONLY)
	FROM: TO: 3532-00-000		23. LEGAL RESIDENCE STATE: <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED
24. STANDARD FORM 50 REMARKS			
POSTED 3 Mar 53			
25. CLEARANCES		26. INITIAL OR SIGNATURE	
A.			
B. CEIL OR POS CONTROL			
C. CLASSIFICATION			
D. PLACEMENT OR ENPL			
E.			
27. APPROVED BY			
8-17-53 AM JESS			

U. S. GOVERNMENT PRINTING OFFICE: 1951-003489

1. Agency and organizational designations				2. Pay roll		3. Block No. BY		4. Ship No.	
5. Employee's name (and social security account number when appropriate) WOOD, J. L.				6. Grade and salary GS-9 \$5184					
PAY ROLL CHANGE DATA									
	BASE PAY	OVERTIME		GROSS PAY	RET.	TAX	BOND	F.I.C.A.	NET PAY
7. Previous normal									
8. Now normal									
9. Pay this period									
10. Remarks: <i>[Signature]</i>				11. Appropriation(s) VR 14				12. Prepared by DA 1/28/53	
								13. Audited by	
<input checked="" type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step-increase									
14. Effective date 1 Feb 53	15. Date last equivalent increase 1 Feb 52	16. Old salary rate \$5184	17. New salary rate \$5330	18. Performance rating is satisfactory or better.					
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods):				(Check applicable box in case of excess LWOP)					
<input type="checkbox"/> No excess LWOP    Total excess LWOP				<input type="checkbox"/> In pay status at end of waiting period. <input type="checkbox"/> In LWOP status at end of waiting period.					
				Initials of Clerk					

STANDARD FORM NO. 1126—Revised  
Form prescribed by Comp. Gen., U.S.  
Nov. 8, 1950, General Regulations No. 102

PAY ROLL CHANGE SLIP—PERSONNEL CODE

pre

1. Agency and organizational designations <b>CENTRAL INTELLIGENCE AGENCY</b>				2. Pay period <b>1/15-1/21/62</b>		3. Block No. <b>177</b>		4. Slip No.	
5. Employee's name (and social security account number when appropriate) <b>GOODPASTER, Ann L.</b>				6. Grade and salary <b>GS-8 \$5080.00</b>					
<b>PAY ROLL CHANGE DATA</b>									
	BASE PAY	OVERTIME		GROSS PAY	RET.	TAX	BOND	F.I.C.A.	NET PAY
7. Previous normal									
8. New normal									
9. Pay this period									
10. Remarks <b>Please return to RDC prior to 14 Feb 62</b>				11. Appropriation(s) <b>WH 56-24</b>			12. Prepared by		
							13. Audited by		
<input checked="" type="checkbox"/> Periodic step-increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step-increase									
14. Effective date <b>3 Feb 62</b>	15. Date last equivalent increase <b>4 Feb 61</b>	16. Old salary rate <b>\$5080.00</b>	17. New salary rate <b>\$5125.00</b>	18. Performance rating as satisfaction of better <i>[Signature]</i> (Signature or other authentication)					
19. LWOP data (Fill in appropriate spaces covering LWOP during following periods). Period(s): <input type="checkbox"/> No excess (WOP. Total excess LWOP _____)				(Check applicable box in case of LWOP) <input type="checkbox"/> In pay status at end of waiting period. <input type="checkbox"/> In LWOP status at end of waiting period.					
STANDARD FORM NO. 1176d-Revised Form provided by Comp. Gen., U.S. Nov. 8, 1950, General Regulations No. 102				PAY ROLL CHANGE SLIP-PERSONNEL COPY <i>ar</i>					

SECRET

CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME <b>Ann L. Goodpasture</b>		DATE <b>7 June 1951</b>
NATURE OF ACTION <b>Integration</b>		EFFECTIVE DATE <b>8 June 1951</b>
	FROM	TO
TITLE	<b>Intelligence Officer GS-9</b>	<b>Administrative Assistant FSS-9</b>
GRADE AND SALARY	<b>GS-9 \$4600.00</b>	<b>FSS-9 \$4470.00 *</b>
OFFICE	<b>OSO</b>	<b>OSO</b>
DIVISION	<b>FDT</b>	<b>FDT</b>
BRANCH		
OFFICIAL STATION	<b>Monterrey</b>	<b>Monterrey</b>
APPROVAL		
QUALIFICATIONS	FOR ASSISTANT DIRECTOR	EXECUTIVE
CLASSIFICATION	PERSONNEL OFFICER <i>H. C. [Signature]</i>	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <input type="checkbox"/> YES <input type="checkbox"/> NO		
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____		
SECURITY CLEARED ON _____		
OVERSEAS AGREEMENT SIGNED _____		
ENTERED ON DUTY _____		
<p style="text-align: center;"><b>PURSUANT TO DCI DIRECTIVE</b>  <b>15 MAY 21 OCT. 1951</b>  <b>SALARY ADJUSTED TO \$ 5060</b></p>		
(SIGNATURE OF AUTHENTICATING OFFICER)		
REMARKS:		
<p>* Subject integrated into the Department of State as FSS-9, with a salary of \$4470.00. Subject is to be paid the difference between CIA salary of \$4600.00 and salary of \$4470.00 to be paid by the Department of State and allowances in accordance therewith.</p> <p>Subject is due a lump sum payment for annual leave to be paid up to 7 June 1951.</p>		

POSTED

COPY IN PERSONNEL FILES  
CONFIDENTIAL FUNDS BRANCH

SECRET

## CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME GO. DPASTINE, Ann L.		DATE 23 April 1951	
NATURE OF ACTION Appointment		EFFECTIVE DATE 27 May 1951	
TITLE  GRADE AND SALARY  OFFICE  DIVISION  BRANCH  OFFICIAL STATION	FROM	TO	
		Intelligence officer (top)	
		GS-9	Inf
		GS-9	\$1600.00
		OSO	
		OUT	
		Conterrey	
APPROVAL			
CLASSIFICATIONS Grave CLASSIFICATION 1 May 51 F-594	FOR ASSISTANT DIRECTOR PERSONNEL OFFICER Thomas M. Fisher	EXECUTIVE 353200	
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON		22 May 1951	
SECURITY CLEARED ON		Confidence	
OVERSEAS AGREEMENT SIGNED		22 May 1951	
ENTERED ON DUTY		27 May 1951	
<p style="text-align: right;"><i>Alex McReid</i> (SIGNATURE OF AUTHENTICATING OFFICER)</p>			
REMARKS:			
<p>Slot 2.</p> <p>Please transfer leave from V funds.</p> <p style="text-align: right;">301</p> <p style="text-align: right;">JF 24 April</p>			

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

(ml)

1. NAME (MR.-MRS.-ONE GIVEN NAME INITIALS, AND SURNAME) <b>Miss Ann L. Goodpasture</b>		2. DATE OF BIRTH <b>28 Nov. 1918 #6635</b>	3. JOURNAL ACTION NO. <b>27 June 1951</b>
4. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Designation</b>			
5. EFFECTIVE DATE <b>25 5/25/51</b>		6. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
7. FROM <b>Intelligence Officer (Ops.)</b>		8. TO	
9. POSITION TITLE <b>OS-9-130 \$1600.00 per. annum.</b>		10. SERVICE, SERIES, GRADE, SALARY <b>OSO TIZ/SEA Branch I</b>	
11. ORGANIZATIONAL DESIGNATIONS		12. HEADQUARTERS	
13. FIELD OR DEPTL. <b>Washington, D. C.</b>		14. FIELD OR DEPTL. <b>FIELD</b>	
15. VETERAN'S PREFERENCE <b>10-PT</b>		16. POSITION CLASSIFICATION ACTION <b>Bu. #1801 CSC/1741 12/19/47</b>	
17. APPROPRIATION <b>2115900</b>		18. DATE OF APPOINTMENT OF AFFIDAVITS (ACCESSIONS ONLY)	
19. LEGAL RESIDENCE <b>Oklahoma</b>		20. STATE	
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.  <b>*To accept other employment.</b>  <b>INB: 5/25/51</b> <b>LEL: 90 hrs., 5/28/51 thru 8 hrs., 6/13/51</b> <b>inc 1 holiday 5/30/51</b>			
ENTRANCE EFFICIENCY RATING:			
D. V. MULCAHY PERSONNEL DIVISION AUTHENTICATION			

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION

(mca)

1. NAME (MR., MISS, MRS., OR OTHER GIVEN NAME, INITIALS, AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Miss Ann L. Goodpasture		28 Nov. 1918	44656	3 Feb. 1951
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Promotion		4 Feb. 1951	Schedule A-6.115(b)	
FROM		TO		
Intelligence Officer (Ops) GS-7		Intelligence Officer (Ops) GS-9		
GS-7-132-44325.00 per annum Bu.#1803 CSC#1740		GS-9-130-44600.00 per annum		
8. POSITION TITLE		9. SERVICE SERIES, GRADE, SALARY		
OSO FDZ/ERA Branch I		OSO FDZ/ERA Branch I		
10. ORGANIZATIONAL DESIGNATIONS		11. HEADQUARTERS		
Washington, D. C.		Washington, D. C.		
12. FIELD OR DEPT'L		13. VETERAN'S PREFERENCE		
FIELD <input checked="" type="checkbox"/> DEPARTMENTAL <input type="checkbox"/>		14. POSITION CLASSIFICATION ACTION		
15. VETERAN'S PREFERENCE		16. DATE OF APPOINTMENT OF AFFIDAVIT (ACCESSIONS ONLY)		
NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/>		Bu.#1801 CSC#1741 12/19/47		
17. APPROPRIATION		18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO)		
FROM: 2115900 TO: 951-100		Yes		
19. LEGAL RESIDENCE		20. DATE OF APPOINTMENT OF AFFIDAVIT (ACCESSIONS ONLY)		
STATE: Oklahoma		CLAIMED <input type="checkbox"/> PROVED <input type="checkbox"/>		
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and may be subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
22. SIGNATURE OR OTHER AUTHENTICATION				
H. C. CLINKSCALE Personnel Branch				


4. PERSONNEL FOLDER COPY



1. Agency and organizational designations <b>CENTRAL INTELLIGENCE AGENCY</b>		2. All period	A. Block No. <b>252-100</b>	B. Slip No.				
3. Employee's name <b>WILLIAM J. ...</b>		4. Grade and salary <b>GS-7 \$4,200.00</b>						
<b>PAY ROLL CHANGE DATA</b>								
	BASE PAY	OVERTIME	GROSS PAY	RET.	TAX	BOND	NET PAY	
7. Previous normal								
8. New normal								
9. Pay this period								
10. Remarks: <b>CGO, FID, SEA DIVISION #1</b>			11. Appropriation(s)		12. Prepared by			
					13. Audited by			
<input checked="" type="checkbox"/> Periodic step increase <input type="checkbox"/> Pay adjustment <input type="checkbox"/> Other step increase								
14. Effective date <b>24 Dec 50</b>	15. Date last equivalent increase <b>25 Dec 49</b>	16. Old salary rate <b>\$4,200.00</b>	17. New salary rate <b>\$4,325.00</b>	18. (a) Effective date of increase <b>24 Dec 50</b> (b) Signature of officer in charge <i>[Signature]</i>		19. Suspense date <b>8 Dec 50</b>		
20. LWOP data (Fill in appropriate spaces covering LWOP during following periods)					(Check applicable box in case of excess LWOP)			
Periods:					<input type="checkbox"/> In pay status at end of waiting period. <input type="checkbox"/> In LWOP status at end of waiting period.			
<input checked="" type="checkbox"/> No excess LWOP            Total excess LWOP <b>None</b>					Initials of <i>[Signature]</i>			
STANDARD FORM NO. 1126 Form prescribed by Comp. Gen., U. S. Feb 3 1949, General Regulations No. 102					<b>PAY ROLL CHANGE SLIP—PERSONNEL COPY</b>			

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION (info)

1. NAME (MR - MRS - MISS - OR OTHER NAME, INITIALS AND SURNAME) <b>Miss Ann L. Goodpasture</b>		2. DATE OF BIRTH <b>28 Nov. 1918</b>	3. JOURNAL OR ACTION NO. <b>4083</b>	4. DATE <b>22 Dec. 1950</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Reassignment</b>		6. EFFECTIVE DATE <b>24 Dec. 1950</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>Schedule A-6.116(b)</b>	
FROM <b>Reports Officer, GS-7 (Intelligence Officer)</b>  <b>GS-7-130-\$4325.00 per annum Bu. 71489 CSC/1AA3</b>  <b>OSO FDZ/SEA Branch I</b>  <b>Washington, D. C.</b>		8. POSITION TITLE <b>Intelligence Officer (Ops) GS-7</b>	TO <b>Intelligence Officer (Ops) GS-7</b>  <b>GS-7-132-\$4325.00 per annum</b>  <b>OSO FDZ/SEA Branch I</b>  <b>Washington, D. C.</b>	
9. SERVICE, SERIES, GRADE, SALARY		10. ORGANIZATIONAL DESIGNATIONS		
11. HEADQUARTERS		12. FIELD OR DEPT'L		
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		
13. VETERAN'S PREFERENCE NONE <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-POINT <input type="checkbox"/> <b>X</b>		14. POSITION CLASSIFICATION ACTION NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input type="checkbox"/> REAL <input checked="" type="checkbox"/> <b>Bu. 71803 CS/1AA3</b>		
15. SEX <b>F</b>	16. RACE <b>W</b>	17. APPROPRIATION FROM: <b>71489</b> TO: <b>71-108</b>		18. SUBJECT TO C. 6. RETIREMENT ACT (YES-NO) <b>Yes</b>
		19. DATE OF APPOINTMENT OF AFFIDAVIT (ACCESSIONS ONLY)		20. LEGAL RESIDENCE <input checked="" type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: <b>Oklahoma</b>
21. REMARKS: This action is subject to all applicable laws, rules, and regulations and is subject to investigation and approval by the United States Civil Service Commission. The action may be corrected or canceled if not in accordance with all requirements.				
ENTRANCE EFFICIENCY RATING: <b>2</b>				
<div style="text-align: right;">   <b>H. C. CLINE</b>                  22. SIGNATURE OF OFFICIAL AUTHORIZING ACTION             </div>				

CENTRAL INTELLIGENCE AGENCY

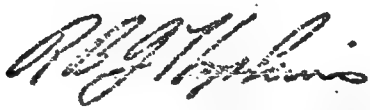
NOTIFICATION OF PERSONNEL ACTION

(part) 130

1. NAME (MR., MISS, MRS., ORS GIVE NAME, INITIAL(S), AND SURNAME)		2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Miss Ann L. Goodpasture		28 Nov. 1918	71809	2/13/50
There is notify you of the following action affecting your employment.				
5. NATURE OF ACTION (USE STANDARD TERM NOLOGY)		6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
Pay Increase - (Periodic)		12/25/49	CIA Admin. Inst. 20-1 Dated 12/9/49	
8. POSITION TITLE		9. SERVICE, SERIES, GRADE, SALARY		
Reports Officer, GS-7 (Intelligence Officer)		Reports Officer, GS-7 (Intelligence Officer)		
GS-7, \$4075.00 per annum		GS-7, \$4200.00 per annum		
10. ORGANIZATIONAL DESIGNATIONS		11. HEADQUARTERS		
OSO COPS - PDZ SEA Division #1		OSO COPS - PDZ SEA Division #1		
12. FIELD OR DEPT L		13. VETERAN'S PREFERENCE		
Washington, D. C.		NONE <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> 15-POINT <input type="checkbox"/>		
14. POSITION CLASSIFICATION ACTION		15. DATE OF APPOINTMENT AFFIDAVIT (ACCESSIONS ONLY)		
Bu. #1489 CSG 1445 12/10/49		16. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: Oklahoma		
21. REMARKS: THIS ACTION IS SUBJECT TO APPLICABLE LAWS, RULES, AND REGULATIONS AND MAY BE SUBJECT TO INVESTIGATION AND APPROVAL BY THE UNITED STATES CIVIL SERVICE COMMISSION. THE ACTION MAY BE CORRECTED OR CANCELED IF NOT IN ACCORDANCE WITH ALL REQUIREMENTS.				
*Last Salary Increase ..... 12/26/48				
Efficiency Rating ..... Excellent				
Dated ..... 12/20/49				
Conduct Report ..... Satisfactory				
Dated ..... 12/23/49				
ENTRANCE EFFICIENCY RATING:				
22. SIGNATURE OR OTHER AUTHENTICATION				
ROBERT S. WATLES Employee Division				

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION **1ha 130**


1. NAME (MR., MISS, MRS., FIRST—MIDDLE INITIAL—LAST) <b>Miss Ann L. Goodpasture</b>		2. DATE OF BIRTH <b>28 Nov 1918</b>	3. JOURNAL OR ACTION NO <b>526</b>	4. DATE <b>10-28-49</b>
This is to notify you of the following action affecting your employment:				
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Conversion-Class. Act of 1949</b>		6. EFFECTIVE DATE <b>10-30-49</b>	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>Letter-DCI-10-28-49</b>	
FROM		TO		
<b>Reports Officer P-2</b> <b>(Intelligence Officer)</b>  <b>P-2 \$3978.00 per annum</b>  <b>OSO</b> <b>COPS</b> <b>SEA</b> <b>DIVISION #1</b>  <b>Washington, D.C.</b>		<b>Reports Officer GS-7</b> <b>(Intelligence Officer)</b>  <b>GS-7 \$4075.00 per annum</b>  <b>OSO</b> <b>COPS - FDZ</b> <b>SEA</b> <b>DIVISION #1</b>  <b>Washington, D.C.</b>		
<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		<input type="checkbox"/> FIELD <input checked="" type="checkbox"/> DEPARTMENTAL		
13. REMARKS				
 <b>Acting Chief, Employees Division</b>				
14. SIGNATURE OR OTHER AUTHENTICATION				
15. VETERAN'S PREFERENCE		16. POSITION CLASSIFICATION ACTION		
NONE <input checked="" type="checkbox"/> PT. <input type="checkbox"/> 10 POINT <input type="checkbox"/> WWII <input type="checkbox"/> WWI <input type="checkbox"/> OTHER <input type="checkbox"/> DISAB. <input type="checkbox"/> WIFE <input type="checkbox"/> WIDOW <input type="checkbox"/>		NEW <input type="checkbox"/> VICE <input type="checkbox"/> I. A. <input checked="" type="checkbox"/> REAL <input type="checkbox"/> <b>En. #1489</b> <b>OSC#1445</b> <b>10/10/47</b>		
17. SEX <b>F</b>	18. RACE <b>W</b>	19. APPROPRIATION FROM: <b>2105900</b> TO: <b>950-108</b>		22. LEGAL RESIDENCE <b>Oklahoma</b>
		20. SUBJECT TO C.S. RETIREMENT ACT (YES—NO) <b>Yes</b>		21. DATE OF OATH (ACCESSIONS ONLY)

STANDARD FORM 50 (5 PART)  
UNITED STATES  
CIVIL SERVICE COMMISSION  
OCTOBER 1946

FORM APPROVED  
BUDGET BUREAU NO. 38-2062

CENTRAL INTELLIGENCE AGENCY

NOTIFICATION OF PERSONNEL ACTION **MS (pl) 130**

1 NAME (MR--MISS--MRS--FIRST--MIDDLE INITIAL--LAST) <b>Miss Ann L. Goodpasture</b>		2 DATE OF BIRTH <b>26 Nov 1918</b>	3 JOURNAL OR ACTION NO.	4 DATE <b>21 March 1949</b>
<i>This is to notify you of the following action affecting your employment:</i>				
5 NATURE OF ACTION (USE STANDARD TERMINOLOGY) <b>Excepted Appointment</b>		6 EFFECTIVE DATE <b>21 March 1949</b>	7 CIVIL SERVICE OR OTHER LEGAL AUTHORITY <b>Schedule A-45</b>	
FROM		TO		
		8 POSITION-TITLE <b>Reports Officer (Intelligence Officer)</b>	<b>P-2</b>	
		9 SERVICE GRADE, SALARY <b>P-2 \$3978.00 per annum</b>		
		10 ORGANIZATIONAL DESIGNATIONS <b>OSO COPS - FBZ SEA Division #1</b>		
		11 HEADQUARTERS <b>Washington, D.C.</b>		
<input type="checkbox"/> FIELD	<input type="checkbox"/> DEPARTMENTAL	12 FIELD OR DEPT L	<input type="checkbox"/> FIELD	<input checked="" type="checkbox"/> DEPARTMENTAL
13. REMARKS  <p><b>Previously employed at \$3978.00 per annum</b></p> <p><b>No-Strike Affidavit has been properly executed.</b></p> <p><b>This appointment is subject to the satisfactory completion of a trial period of six months.</b></p>				
<p style="text-align: right;">  <b>WILLIAM J. KELLY</b>  <b>Personnel Officer</b></p>				
14 SIGNATURE OR OTHER AUTHENTICATION				
15. VETERAN'S PREFERENCE		15. POSITION CLASSIFICATION ACTION		
NONE	SPT	10 POINT	WWI	WWII
<input checked="" type="checkbox"/>		DISAB	WIFE	WIDOW
		NEW	VIC	I A
				REAL
			<input checked="" type="checkbox"/>	
		<b>Bu. #1489 CSC #1445 10/10/47</b>		
17 SEX <b>F</b>	18 RACE <b>W</b>	19 APPROPRIATION FROM <b>2399900</b> TO <b>959-108</b>		20 SUBJECT TO C. S. RETIREMENT ACT (YES--NO) <b>Yes</b>
		21 DATE OF OATH (ACCESSIONS ONLY) <b>21 March 1949</b>		22. LEGAL RESIDENCE <b>Oklahoma</b>

4. PERSONNEL FOLDER COPY

U. S. GOVERNMENT PRINTING OFFICE 1948 783384

**SECRET**PERSONNEL ACTION REQUEST  
SPECIAL FUNDS

NOTE: See instructions on reverse side.

NAME <b>GOODPASTURE, Ann L.</b>		DATE <b>7 February 1949</b>	
LEGAL ADDRESS <b>Oklahoma</b>		MARITAL STATUS <b>Single</b>	
LOCAL ADDRESS		NUMBER OF DEPENDENTS	
TELEPHONE	CITIZENSHIP <b>USA</b>	SEX <b>F</b>	AGE <b>30</b>
NATURE OF ACTION <b>Resignation</b>		EFFECTIVE DATE <b>20 March 1949</b>	

	FROM	TO
Title	<b>Administrative Assistant</b>	
Grade and Salary	<b>CAF-7 \$3978.00</b>	
Office - Branch	<b>OSO - FBZ</b>	
Division		
Section		
Official Station	<b>Washington, D.C. (Field)</b>	
ALLOWANCES (Per Annum)		
Quarters		
Cost of Living		
Special Foreign Living		

REMARKS: (May be continued to reverse side)

Please transfer accrued leave to vouchered funds.

POSTED  
*653 3/20/49*  
*for*

## APPROVAL

FIELD		HEADQUARTERS U.S.	
CHIEF OF STATION	DATE	PERSONNEL OFFICER	DATE
SPECIAL FUNDS OFFICER	DATE	BRANCH CHIEF	DATE
	DATE	<i>E. M. J. Smith</i>	DATE
	DATE	FOR THE ASSISTANT DIRECTOR	DATE
	DATE	<i>James F. McLean</i>	DATE
	DATE	CHAIRMAN PERSONNEL REVIEW COMMITTEE	DATE
	DATE	<i>L. D.</i>	DATE
	DATE	SPECIAL FUNDS OFFICER	DATE

**SECRET**

SECRET

## CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME <b>GOODPASTURE, Ann L.</b>						DATE <b>1 April 1949</b>	
RESIDENCE AT TIME OF EMPLOYMENT							
LOCAL ADDRESS							
CITIZENSHIP <b>USA</b>	SEX <b>F</b>	DATE OF BIRTH <b>28 Nov. 1918</b>	MARITAL STATUS <b>Single</b>	NO. OF DEPENDENTS	DATE OF APPOINTMENT		
NATURE OF ACTION <b>Amendment to Periodic Pay Increase</b>						EFFECTIVE DATE <b>20 December 1948</b>	
		FROM		TO			
TITLE		<b>Administrative Assistant</b>		<b>Administrative Assistant</b>			
GRADE AND SALARY		<b>CAF-7 \$3852.60</b>		<b>CAF-7 \$3978.00</b>			
OFFICE		<b>OSO - FBZ</b>		<b>OSO - FBZ</b>			
BRANCH							
DIVISION							
OFFICIAL STATION		<b>Washington, D.C. (Field)</b>		<b>Washington, D.C. (Field)</b>			
APPROVAL							
FIELD				HEADQUARTERS			
CHIEF OF STATION				COPY IN PAYROLL FILES			
				FOR THE ASSISTANT <b>CONFIDENTIAL FUNDS BRANCH</b> <i>Amw</i> INITIALS			
				PERSONNEL OFFICER <i>George E. Melton</i>			
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS						YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> <i>Deputy Personnel Office</i>	
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____							
SECURITY CLEARED ON _____							
OVERSEAS AGREEMENT SIGNED _____							
ENTERED ON DUTY _____							
AUTHENTICATED BY <i>(Signature)</i>							
REMARKS  <b>Original action amended to reflect the correct effective date.</b>							

SECRET

SECRET

PERSONNEL ACTION REQUEST  
SPECIAL FUNDS

*B*

NOTE: See instructions on reverse side.

NAME <b>Ann L. GOODPASTER</b>		DATE <b>7 December 1948</b>	
LEGAL ADDRESS <b>Oklahoma</b>		MARITAL STATUS <b>Single</b>	
LOCAL ADDRESS		NUMBER OF DEPENDENTS	
TELEPHONE	CITIZENSHIP <b>USA</b>	SEX <b>F</b>	AGE <b>30</b>
NATURE OF ACTION <b>Periodic Pay Increase</b>		EFFECTIVE DATE <b>1 Dec 48</b>	

	FROM	TO
Title	Administrative Assistant	Administrative Assistant
Grade and Salary	CAF-7 \$3727.20	CAF-7 \$3978.00
Office - Branch	OSO - FBZ	OSO - FBZ
Division		
Section		
Official Station	Washington, D.C. (Field)	Washington, D.C. (Field)
ALLOWANCES (Per Annum)		
Quarters		
Cost of Living		<i>awd 2/3/49</i>
Special Foreign Living		<i>Y.T.</i>

REMARKS: (May be continued to reverse side)

Subject has received no increase in salary since 14 December 1947 when she received a temporary promotion to a CAF-9, effective only while at her field post. Subject returned from the field on 7 December and was downgraded to CAF-7, \$3727.20. Subject was promoted to CAF-7 on 17 April 1946. I certify that subjects service and conduct have been satisfactory in all respects.

APPROVAL

FIELD		HEADQUARTERS U.S.	
CHIEF OF STATION	DATE	<i>H. C. Clark</i>	<i>1 Dec 48</i>
SPECIAL FUNDS OFFICER	DATE	PERSONNEL OFFICER	DATE
	DATE	<i>Robert J. Winters</i>	<i>1 Dec 48</i>
	DATE	BRANCH CHIEF	DATE
	DATE	FOR THE ASSISTANT DIRECTOR	DATE
	DATE	CHAIRMAN PERSONNEL REVIEW COMMITTEE	DATE
	DATE	<i>William H. Davis</i>	<i>1 Dec 48</i>
	DATE	SPECIAL FUNDS OFFICER	DATE

SECRET



SECRET

## CONFIDENTIAL FUNDS PERSONNEL ACTION

NAME: <b>GOODPASTURE, Ann L.</b>		DATE: <b>1 April 1949</b>	
RESIDENCE AT TIME OF EMPLOYMENT			
LOCAL ADDRESS			
CITIZENSHIP <b>USA</b>	SEX <b>F</b>	DATE OF BIRTH <b>28 Nov. 1918</b>	MARITAL STATUS <b>Single</b>
NO. OF DEPENDENTS		DATE OF APPOINTMENT	
NATURE OF ACTION <b>Amendment to Transfer and Change to a Lower Grade</b>			EFFECTIVE DATE <b>7 December 1948</b>
FROM		TO	
TITLE		<b>Administrative Assistant</b>	
GRADE AND SALARY		<b>CAF-7 \$3852.60</b>	
OFFICE		<b>OSO - FBZ</b>	
BRANCH			
DIVISION			
OFFICIAL STATION		<b>Washington, D.C. (Field)</b>	
APPROVAL			
FIELD		HEADQUARTERS	
CHIEF OF STATION <i>[Signature]</i>		FOR THE ASSISTANT DIRECTOR	
PERSONNEL OFFICER <i>[Signature]</i>			
POST DIFFERENTIAL AUTHORIZED IN ACCORDANCE WITH AGENCY REGULATIONS <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
OATH OF OFFICE AND NO STRIKE AFFIDAVIT EXECUTED ON _____			
SECURITY CLEARED ON _____			
OVERSEAS AGREEMENT SIGNED _____			
ENTERED ON DUTY _____			
AUTHENTICATED BY <i>[Signature]</i>			
REMARKS: <b>Original action amended to reflect correct salary.</b>			

SECRET

SECRET

B

PERSONNEL ACTION REQUEST  
SPECIAL FUNDS

NOTE: See Instructions on reverse side.

NAME <b>Ann L. GOODPASTURE</b>		DATE <b>7 December 1948</b>	
LEGAL ADDRESS <b>Oklahoma</b>		MARITAL STATUS <b>Single</b>	
LOCAL ADDRESS		NUMBER OF DEPENDENTS	
TELEPHONE	CITIZENSHIP <b>USA</b>	SEX <b>F</b>	AGE <b>30</b>
NATURE OF ACTION <b>Transfer and Downgrade - Change to Down grade</b>		EFFECTIVE DATE <b>7 December 1948</b>	

	FROM	TO
Title	Administrative Assistant	Administrative Assistant
Grade and Salary	CAP-9 \$4479.60	CAP-7 \$3727.20
Office - Branch	OSO - FBZ	OSO - FBZ
Division		
Section		
Official Station	Bombay	Washington, D.C. (Field)
ALLOWANCES (Per Annum)		
Quarters		
Cost of Living		
Special Foreign Living		

REMARKS: (May be continued to reverse side)

Subject has completed tour of duty in the field.

WFO 2/3/49  
Jif

APPROVAL

FIELD		HEADQUARTERS U. S.	
CHIEF OF STATION	DATE	<u>E. M. Jensen</u>	DATE <u>12/8/48</u>
SPECIAL FUNDS OFFICER	DATE	PERSONNEL OFFICER	
	DATE	BRANCH CHIEF	DATE
	DATE	FOR THE ASSISTANT DIRECTOR	DATE
	DATE	CHAIRMAN PERSONNEL REVIEW COMMITTEE	DATE
	DATE	<u>Charles W. Davis</u>	DATE <u>12/17/48</u>
	DATE	SPECIAL FUNDS OFFICER	

SECRET

# PERSONNEL ACTION REQUEST SPECIAL FUNDS

NOTE: See instructions on reverse side.

NAME <b>Anne L. Goodpasture</b>		DATE <b>23 December 1947</b>
LEGAL ADDRESS <b>Oklahoma</b>		MARITAL STATUS <b>Single</b>
LOCAL ADDRESS		NUMBER OF DEPENDENTS
TELEPHONE	CITIZENSHIP <b>USA</b>	SEX <b>F</b> AGE <b>29</b>
NATURE OF ACTION <b>TAMP Promotion</b>		EFFECTIVE DATE <b>14 Dec 47</b>

	FROM	TO
Title	<b>Administrative Assistant</b>	<b>Administrative Assistant</b>
Grade and Salary	<b>GAF-7 \$3397.20</b>	<b>GAF-9 \$4149.60</b>
Office - Branch	<b>OSO-FBZ</b>	<b>OSO-FBZ</b>
Division		
Section		
Official Station	<b>Bombay</b>	<b>Bombay</b>
ALLOWANCES (Per Annum)		
Quarters		
Cost of Living		
Special Foreign Living		

REMARKS: (May be continued to reverse side)

Subject has had no pay increase since 17 April 1947.  
See attached justification. *This promotion to be effective while on duty in Bombay only.*  
 DGC 02/10/47  
 Adj EOD 09/18/47  
 LCD 09/14/47

APPROVAL	
FIELD	HEADQUARTERS U. S.
CHIEF OF STATION	<b>E. M. Jewell</b> 26 Dec 1947 PERSONNEL OFFICER
SPECIAL FUNDS OFFICER	<b>Henry W. Tinsley</b> 23 DEC 47 BRANCH CHIEF
	<b>Max Friedman</b> 29 Dec 47 FOR THE ASSISTANT DIRECTOR
	<b>Chairman PERSONNEL REVIEW COMMITTEE</b>
	<b>Charles H. Davis</b> 31 Dec 47 SPECIAL FUNDS OFFICER

# DISTRIBUTION OF SALARY

To be paid by Bombay office \$ 148.50  
 (FIELD)  
 Tax withheld in the United States 48.40  
 Insurance to be withheld in the United States 12.50  
 (Amount subject to change if premium is increased or decreased)  
 Retirement withheld in United States 15.96  
 Other (Specify in detail) -----

## Allolements

93.84

Name of Allee C.H. Goodpasture

Address Box S22, Tipton, Okla.

Total Gross Salary Per Pay Period \$ 319.20

I HEREBY AUTHORIZE AND DIRECT THE DISBURSING OFFICE TO MAKE THE ABOVE ALLOTMENTS FROM MY COMPENSATION. ALL ADJUSTMENTS IN SALARY TO BE EFFECTED BY:

INITIAL ONE  
 NET OVERSEAS PAYMENT \_\_\_\_\_  
 U. S. ALLOTMENT \_\_\_\_\_

SIGNATURE OF EMPLOYEE \_\_\_\_\_

REMARKS: (Continued from reverse side)

100-10000-10000

17 DEC 50 14 30

INSTRUCTIONS: 1. Prepare in triplicate. 2. Note under "Remarks" whether action is transfer from vouchered funds or another government agency. 3. Form is prepared in the field, enter distribution of salary over signature of employee. 4. If job description or other information is appropriate, enter in "Remarks."

## PERSONNEL ACTION REQUEST

SECRET

This form is to be initiated in triplicate by the appropriate Branch or Office Chief for processing in accordance with existing personnel procedures. Upon approval, the original and one copy will be retained by the Disbursing Office and one copy returned to the originating office.

NAME <u>Anne L. GOODPASTURE</u>		DATE <u>12 November 1946</u>
NATURE OF ACTION <u>Promotion</u>	NUMBER OF DEPENDENTS _____	
EFFECTIVE DATE <u>17 Apr. 1947</u>	LOCATION OF DEPENDENTS _____	
MARITAL STATUS <u>Single</u>	CITIZENSHIP <u>USA</u>	SEX <u>F</u> AGE <u>27</u>
FROM		TO
POSITION <u>Clerk</u>	POSITION <u>Administrative Assistant</u>	
CONTROL NO. _____	CONTROL NO. _____	
CLASSIFICATION <u>CAF-5</u>	CLASSIFICATION <u>CAF-7</u>	
ANNUAL GROSS SALARY <u>1770.20</u>	ANNUAL GROSS SALARY <u>\$3397.20</u>	
OFFICIAL STATION <u>Bombay (India)</u>	OFFICIAL STATION <u>Bombay</u>	
ALLOWANCES:	ALLOWANCES:	
QUARTERS _____	QUARTERS _____	
COST OF LIVING _____	COST OF LIVING _____	
SPECIAL FOREIGN LIVING _____	SPECIAL FOREIGN LIVING _____	
TOTAL _____	TOTAL _____	
OFFICE:	OFFICE:	
BRANCH <u>Special Operations A-582</u>	BRANCH <u>Special Operations A-582</u>	
DIVISION <u>D</u>	DIVISION <u>D</u>	

TO BE PAID BY \_\_\_\_\_ OFFICE \$ 150.00  
 (Field)  
 TAX WITHHELD IN UNITED STATES 35.00  
 INSURANCE TO BE WITHHELD IN UNITED STATES  
 (Amount subject to change if premium is increased or decreased) 12.50  
 SAVINGS BONDS \_\_\_\_\_  
 RETIREMENT WITHHELD IN UNITED STATES \_\_\_\_\_  
 OTHER (Specify in detail) \$175.00 Unliquidated Travel Advance.  
 ALLOTMENTS \_\_\_\_\_ 60.82  
 (Name of Allottee)  
 Address \_\_\_\_\_

TOTAL GROSS SALARY PER PAY PERIOD \$ 261.32

I hereby authorize and direct the Disbursing Office to make above allotments from my compensation.

X  
 Form No. 37-1  
 Sep 1946

\_\_\_\_\_  
 (Signature of Employee)

JOB DESCRIPTION:

SPECIAL QUALIFICATIONS

REASONS FOR ACTION

DATE OF LAST PROMOTION

APPROVED \_\_\_\_\_ OFFICE

(Field)

Date \_\_\_\_\_

(Chief of Mission)

Date \_\_\_\_\_

(Security Officer)

Date \_\_\_\_\_

(Special Funds Officer)

Wm G. Humph 15 Nov 1946

APPROVED \_\_\_\_\_ U.S. OFFICE

(Administrative Officer)

Date 13 Nov

(Branch Chief)

Date 14 Nov

(Chairman, Pers. Review Com.)

Date \_\_\_\_\_

(Special Funds Officer)

Date 15 Nov

**PERSONNEL ACTION REQUEST**

This form is to be initiated in triplicate by the appropriate Branch or Office Chief for processing in accordance with existing personnel procedures. Upon approval, the original and one copy are retained by the Disbursing Office and one copy returned to the originating office.

NAME <u>GOOPSTUTT, ANN L.</u>		DATE <u>12 March 1947</u>
NATURE OF ACTION <u>Periodic Increase</u>	NUMBER OF DEPENDENTS _____	
EFFECTIVE DATE <u>6 April 1947</u>	LOCATION OF DEPENDENTS _____	
MARITAL STATUS <u>Single</u>	CITIZENSHIP <u>U.S.</u>	SEX <u>F</u> AGE <u>28</u>
FROM		TO
POSITION <u>Clerk</u>	POSITION <u>Clerk</u>	
CONTROL NO. _____	CONTROL NO. _____	
CLASSIFICATION <u>C&amp;F-5</u>	CLASSIFICATION <u>C&amp;F-5</u>	
ANNUAL GROSS SALARY <u>\$2770.20</u>	ANNUAL GROSS SALARY <u>\$2895.60</u>	
OFFICIAL STATION <u>Bosny</u>	OFFICIAL STATION <u>Bosny</u>	
ALLOWANCES:	ALLOWANCES:	
QUARTERS _____	QUARTERS _____	
COST OF LIVING _____	COST OF LIVING _____	
SPECIAL FOREIGN LIVING _____	SPECIAL FOREIGN LIVING _____	
TOTAL _____	TOTAL _____	
OFFICE:	OFFICE:	
BRANCH <u>OSO-PBZ</u>	BRANCH <u>OSO-PBZ</u>	
DIVISION _____	DIVISION _____	

TO BE PAID BY _____ OFFICE	\$ <u>150.00</u>
(Field)	
TAX WITHHELD IN UNITED STATES	<u>30.00</u>
INSURANCE TO BE WITHHELD IN UNITED STATES (Amount subject to change if premium is increased or decreased)	<u>12.50</u>
SAVINGS BONDS	_____
RETIREMENT WITHHELD IN UNITED STATES	_____
OTHER (Specify in detail)	_____
ALLOTMENTS _____	<u>29.00</u>
(Name of Allottee)	
Address _____	

TOTAL GROSS SALARY PER PAY PERIOD \$222.75

I hereby authorize and direct the Disbursing Office to make above allotments from my compensation.

JOB DESCRIPTION:

SPECIAL QUALIFICATIONS

REASONS FOR ACTION

DATE OF LAST PROMOTION

Periodic Pay Increase - Last Salary Increase - 10 March 1946

APPROVED \_\_\_\_\_ OFFICE  
(Field)

\_\_\_\_\_  
(Chief of Mission) Date \_\_\_\_\_

\_\_\_\_\_  
(Security Officer) Date \_\_\_\_\_

\_\_\_\_\_  
(Special Funds Officer) Date \_\_\_\_\_

APPROVED - U.S. OFFICE

*D. B. Higgins*  
(Administrative Officer) Date \_\_\_\_\_

*Lloyd George*  
(Branch Chief) Date *20 Mar 47*

\_\_\_\_\_  
(Chairman, Pers. Review Com.) Date \_\_\_\_\_

*E. H. [Signature]*  
(Special Funds Officer) Date \_\_\_\_\_





WAR DEPARTMENT  
NOTIFICATION OF PERSONNEL ACTION  
(DEPARTMENTAL)

Eight

1. Date - 6 January 1947

Date of Birth

11/20/1918

2. TO Am La Signature S. S. NO.

24. Civil Science in Other, Legal  
Authority

4 THROUGH: \_\_\_\_\_ 50

When an object is moved it is to be considered

This is to notify you of the following action concerning your employment, which is subject to the provisions on the reverse hereof. This form is an official record of your service history in the War Department and should be retained for future reference.

5. NATURE OF ACTION (Use standard terminology)

6 EFFECTIVE DATE

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326	327	328	329	330	331	332	333	334	335	336	337	338	339	340	341	342	343	344	345	346	347	348	349	350	351	352	353	354	355	356	357	358	359	360	361	362	363	364	365	366	367	368	369	370	371	372	373	374	375	376	377	378	379	380	381	382	383	384	385	386	387	388	389	390	391	392	393	394	395	396	397	398	399	400	401	402	403	404	405	406	407	408	409	410	411	412	413	414	415	416	417	418	419	420	421	422	423	424	425	426	427	428	429	430	431	432	433	434	435	436	437	438	439	440	441	442	443	444	445	446	447	448	449	450	451	452	453	454	455	456	457	458	459	460	461	462	463	464	465	466
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Female

Termination: 00

~~11~~ 30 November, 1946

✕

7 POSITION  
TITLE

(FROM)

**Clerk**

(TO)

VETERAN		SP		10P	
No	Pl	No	Pl	No	Pl

8 SERVICE  
GRADE AND  
SALARY

CAF-5 32770.20 p.a.

9 INRCA  
SERVICE  
OFFICE

SSU, RD

10 DIVISION  
BRANCH AND  
SECTION

## Registry

11. DUTY STA  
TION AND  
LOCATION

Washington, D.C.

WASHINGTON, D. C.

No.	Name of Candidate	Grade	Score	Remarks
1	John Doe	A	95	Excellent
2	Jane Smith	B	88	Good
3	Mike Johnson	C	72	Fair
4	Sarah Brown	D	65	Needs Improvement
5	David Wilson	F	58	Failing

Name	Vice	Ident.	Address
------	------	--------	---------

[illegible]

Bu.#916  
CSC #9

12. REMARKS

**\*To accept an Excepted Appointment**

\*Correction of action dated 12/13/46 to show correct effective date.

21 Date of Oath:  
Anytime After Oath

21. Journal of Action No.

SSU-3

By order of the Secretary of War

John H. Mattys

**Administrative Assistant**



WAR DEPARTMENT  
NOTIFICATION OF PERSONNEL ACTION  
(DEPARTMENTAL)

1. Date 13 December 1946

2. ntw

2. TO Ann L Goodpasture

3. S S NO.

13 Date of Birth  
11/23/1918

14 Civil Service or Other Legal Authority

4. THROUGH

Office in which Employed or to be Employed

This is to notify you of the following action concerning your employment, which is subject to the provisions on the reverse hereof. This form is an official record of your service history in the War Department and should be retained for future reference.

5. NATURE OF ACTION (Use standard terminology)

**Terminations**

6 EFFECTIVE DATE

17 November 1946

15 Male

Female

☒

7 POSITION TITLE

**Clark**

(FROM)

(TO)

8 SERVICE GRADE AND SALARY

**CAF-5 \$2770.20 p.a.**

9 FORCE SERVICE OFFICE

**SSU, WD**

10 DIVISION BRANCH AND SECTION

**Registry**

11 DUTY STATION AND LOCATION

**Washington, D.C.**

**WASHINGTON, D. C.**

16 Non Veteran

VETERAN

No Prof

SP4

100%

☒

17 Civil Service Retirement

☒

Yes

No

18 White

Negro

Other

☒

19 Nature of Position

New

Vice

12th

Adm

100%

Reference Name No. Etc.

**Bu. #916**

**CSC #9**

**7/10/42**

20 Date of Oath  
Accession Action Only

21 Journal or Action No.

**SSU-17**

12 REMARKS:

**Wto accept an Excepted Appointment**

By order of the Secretary of War

*John H. Matton*

Administrative Assistant

**WAR DEPARTMENT  
OFFICE OF STRATEGIC SERVICES UNIT  
WASHINGTON, D. C.**

Name **GOODPASTURE, Ann L. (Miss)**Date: **5 June 1946**

Unit

This is to notify you that the ~~Office~~ of Strategic Services has taken the following action concerning your employment:

Nature of action: **Transfer**Effective date: **5 June 1946**

	FROM—	TO—
Position.....	<b>Clerk-Stenographer</b>	<b>Clerk</b>
Grade and salary...	<b>CAF-5, \$2430 per annum P-5085</b>	<b>CAF-5, \$2430 per annum</b>
Branch.....	<b>SI</b>	<b>Registry</b>
Division.....		
Section.....		
Headquarters.....	<b>Washington, D. C.</b>	<b>Washington, D. C.</b>
Departmental or Field.....	<b>Field</b>	<b>Departmental</b>

REMARKS:

*65 W.P.R.  
6-6-46*

- ☒ Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- ☒ This appointment is for such time as your services may be required and funds are available for the work of **OS. SSU.**
- ☐ This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*James B. Oprea*

CSC Report No.

Dept.

Civil Service or Other  
Legal AuthorityReg. XVI  
Section 2

Appropriation

**212/60425.001****1010-410****1022-48****#135**

Date of birth

**11/28/1918**

Legal residence

**Oklahoma**

Sex

**Female**

NATURE OF POSITION

V		Bu #916
IA	<b>x</b>	CSC #9
VV		7/10/42
New		
Annual Post Allowance		

SUBJECT TO—

Investigation..... ☐1 year trial  
period..... ☐

**WAR DEPARTMENT**  
**OFFICE OF STRATEGIC SERVICES**  
 WASHINGTON, D. C.

Name: **Goodpasture, Ann L. (Miss)**Date: **4 March 1946**

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: **Transfer**Effective date: **30 March 1946**

	FROM—	TO—
Position.....	<b>Clerk-Steno</b> 2430	<b>Clerk-Steno</b> 2430
Grade and salary.....	<b>CAF-5 \$2320 per annum</b>	<b>CAF-5 \$2320 per annum</b>
Branch.....	<b>SI</b>	<b>SI</b>
Division.....		
Section.....		
Headquarters.....	<b>Shanghai, China</b>	<b>Washington, D.C.</b>
Departmental or Field.....	<b>Field</b>	<b>Field*</b>

REMARKS: **\*Not to exceed 90 days within continental U.S.**

- ☒ Subject to 5% deduction for the Civil Service Retirement and Disability Fund. *63 to PP 4-15-46*
- ☒ This appointment is for such time as your services may be required and funds are available for the work of OSS.
- ☒ This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*L. G. ...*  
 Chief, Civilian Personnel.

U. S. GOVERNMENT PRINTING OFFICE 16-24723

PERSONNEL FOLDER COPY

CSC Report No.

**Field**

Civil Service or Other Legal Authority

**A-1-7**

Appropriation  
**2160160 001**  
**1020-420**  
**C 2101-46**

Date of birth  
**11/28/1918**

Legal residence  
**Oklahoma**

Sex  
**Female**

NATURE OF POSITION

V	
IA	
VV	
New	<b>X</b>

**F-5065**  
**3/30/46**

Annual Post Allowance

SUBJECT TO—

Investigation..... ☐1 year trial period..... ☐

310

MM:htw

**WAR DEPARTMENT**  
**STRATEGIC SERVICES**  
 WASHINGTON, D. C.

Name: **GOODPASTER, Anna L. (Miss)**Date: **10 March 1946**

This is to notify you that the ~~Office~~ <sup>has</sup> Strategic Services has taken the following action concerning your employment:

Nature of action: **Periodic Pay Increase**Effective date: **10 March 1946**

	FROM—	TO—
Position.....	Clerk-Stenographer	Clerk-Stenographer
Grade and salary.....	CAF-5, \$2320 per annum F-5065	CAF-5, \$2430 per annum *
Branch.....	SI	SI
Division.....		
Section.....		
Headquarters.....	Shanghai, China	Shanghai, China
Departmental or Field.....	Field	Field

REMARKS: **Last pay increase 3/1/45**

\*Plus living and quarters allowance at the rate authorized in Budget Circular A-8.

*63 to 11  
5-22-46*

- ☒ Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- ☒ This appointment is for such time as your services may be required and funds are available for the work of ~~SI~~ **SHU**.
- ☐ This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*James B. Opasta*

CSC Report No. <b>Field (a)</b>
Civil Service or Other Legal Authority  <b>Public Law 200 Section 2b</b>
Appropriation <b>1161300 0 2101-46</b>
Date of birth <b>11/28/1918</b>
Legal residence <b>Oklahoma</b>
Sex <b>Female</b>
NATURE OF POSITION
V <input type="checkbox"/>
IA <input type="checkbox"/>
VV <input type="checkbox"/>
New <input checked="" type="checkbox"/> <b>F-5065 12/16/45</b>
Annual Post Allowance

STUBENT TO—

Investigation..... ☐

1 year trial period..... ☐

Chief, ~~Personnel~~ **Personnel**, Division 1

M:ac 310

WAR DEPARTMENT  
OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: GOODPASTURE, ANN L. (MISS)

Date: 29 January 1946

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: Appointment by Transfer \*

Effective date: 16 December 1945

	FROM—	TO—
Position.....	Clerk-Stenographer	Clerk-Stenographer
Grade and salary..	CAF-5, \$2320 per annum	CAF-5, \$2320 per annum **
Branch.....	Research & Analysis	SI
Division.....	Far East	
Section.....		
Headquarters.....	Shanghai, China	Shanghai, China
Departmental or Field.....	Field	Field

## REMARKS:

\* From I.R.I.S., State Department

13088  
2-6-46

- ☒ Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- ☒ This appointment is for such time as your services may be required and funds are available for the work of OSS.
- ☐ This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*[Signature]*

Chief, Civilian Personnel.

PERSONNEL FOLDER COPY

CSC Report No.	
Field	
Civil Service or Other Legal Authority	
Schedule A-1-7	
Appropriation	
1161300 C 2101-46	
Date of birth	
11/28/1918	
Legal residence	
Oklahoma	
Sex	
Female	
NATURE OF POSITION	
V	
IA	
VV	F-5065 12/16/45
New	X
Annual Post Allowance	
** \$1980 per annum	
SUBJECT TO—	
Investigation..... <input type="checkbox"/>	
1 year trial period..... <input type="checkbox"/>	

ak 310

IRIS  
STATE DEPARTMENT  
OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: GOODPASTURE, ANN L. (MISS)

Date: 29 January 1946

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: Separation (transfer) \*

Effective date: 15 December 1945 COB

	FROM—	TO—
Position.....	Clerk-Tenographer	
Grade and salary.....	CAF-5, \$2320 per annum * F-5018	
Branch.....	Research & Analysis	
Division.....	Far East	
Section.....		
Headquarters.....	Shanghai, China	
Departmental or Field.....	Field	

REMARKS: \* To War Department, S.S.U.

- ☒ Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- ☐ This appointment is for such time as your services may be required and funds are available for the work of OSS.
- ☐ This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*[Signature]*  
Chief, Civilian Personnel.

CSC Report No.	
IRIS - Field	
Civil Service or Other Legal Authority	
Appropriation	
1161300 C 2201-46	
Date of birth	
11/28/1918	
Legal residence	
Oklahoma	
Sex	
Female	
NATURE OF POSITION	
V	<input type="checkbox"/>
IA	<input type="checkbox"/>
VV	<input type="checkbox"/>
New	<input type="checkbox"/>
Annual Post Allowance	
*\$1980 per annum	
SUBJECT TO—	
Investigation.....	<input type="checkbox"/>
1 year trial period.....	<input type="checkbox"/>

**IRIS**  
**STATE DEPARTMENT**  
**OFFICE OF STRATEGIC SERVICES**  
**WASHINGTON, D. C.**

Name: **COOPASTURE, Ann L. (Miss)**

Date: **October 25, 1945**

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: **Transfer \***

Effective date: **October 25, 1945**

	FROM—	TO—
Position.....	Clerk-Stenographer	Clerk-Stenographer
Grade and salary..	CAF-5, \$2320 per annum	CAF-5, \$2320 per annum **
Branch.....	Research & Analysis	Research & Analysis
Division.....	Far East	Far East
Section.....		
Headquarters.....	Chungking, China	Shanghai, China
Departmental or Field.....	Field	Field

REMARKS:

\* Per Cable #SEAN 4017

*1-22-46*

- ☒ Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- ☒ This appointment is for such time as your services may be required and funds are available for the work of OSS.
- ☒ This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

CSC Report No.	
<b>IRIS - Dept.</b>	
Civil Service or Other Legal Authority	
<b>Schedule A-1-7</b>	
Appropriation	
<b>1961097.001</b>	
<b>DTT #1</b>	
Date of birth	
<b>11/28/1918</b>	
Legal residence	
<b>Oklahoma</b>	
Sex	
<b>Female</b>	
NATURE OF POSITION	
V	
IA	
VV	
New	<input checked="" type="checkbox"/> <b>P-5018</b>
Annual Post Allowance	
<b>** \$ 1980 p.a.</b>	
SUBJECT TO—	
Investigation.....	<input type="checkbox"/>
year trial period.....	<input type="checkbox"/>

*John T. ...*  
Chief, Civilian Personnel

PERSONNEL FOLDER COPY

M:ts 310



IRIS  
STATE DEPARTMENT  
OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: Goodpasture, Ann L. (Miss) Date: 1 October 1945

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: Appointment by transfer\*

Effective date: 1 October 1945

FROM—	TO—
Position.....	Clerk-Stenographer
Grade and salary.....	CAF-6, \$2530 per annum**
Branch.....	Research & Analysis
Division.....	Per East
Section.....	
Headquarters.....	Chungking, China
Departmental or Field.....	Field

REMARKS:

\*From Office of Strategic Services

\*\*Living and quarters allowance at the base rate of \$1500 per annum plus \$600 per annum when government quarters are not provided.

- ☒ Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- ☒ This appointment is for such time as your services may be required and funds are available for the work of OSS.
- ☐ This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

CSC Report No.	
Field	
Civil Service or Other Legal Authority	
E.O. 9621 2/20/45	
Appropriation	
1961097.001 C LTR \$1	
Date of birth	
11/23/1913	
Legal residence	
Oklahoma	
Sex	
Female	
NATURE OF POSITION	
V	
IA	F-5019
VV	2/23/45
New	X
Annual Post Allowance	
SUBJECT TO—	
Investigation.....	<input type="checkbox"/>
1 year trial period.....	<input type="checkbox"/>

**OFFICE OF STRATEGIC SERVICES**  
WASHINGTON, D. C.

Name: **GOODPASTURE, ANN L. (MISS)** Date: **10 Sept. 1945**

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: **Transfer**

Effective date: **23 September 1945**

	FROM—	TO—
Position.....	<b>Clerk-Stenographer</b>	<b>Clerk-Stenographer</b>
Grade and salary..	<b>CAF-5, \$2320 per annum</b>	<b>CAF-5, \$2320 per annum</b>
Branch.....	<b>Research &amp; Analysis</b>	<b>Research &amp; Analysis</b>
Division.....		<b>Far East</b>
Section.....		
Headquarters.....	<b>New Delhi, India</b>	<b>Chungking, China</b>
Departmental or Field.....	<b>Field</b>	<b>Field</b>

**REMARKS:**

\* Living and quarters allowance at the base rate of \$1500 per annum plus \$500 per annum when government quarters are not provided.

- ☒ Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- ☒ This appointment is for such time as your services may be required and funds are available for the work of OSS.
- ☐ This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

CSC Report No.  
**Field**

Civil Service or Other  
Legal Authority

**Schedule A-1-7**

Appropriation

**1161300**  
**C. 2201-46**

Date of birth

**11/29/1918**

Legal residence

**Oklahoma**

Sex

**Female**

NATURE OF POSITION

V		
IA		<b>F-5018</b>
VV		<b>9/23/45</b>
New	<b>X</b>	<b>9/23/45</b>

Annual Post Allowance

SUBJECT TO—

Investigation..... ☐

1 year trial period..... ☐

MI:ak

310

**OFFICE OF STRATEGIC SERVICES**  
WASHINGTON, D. C.

Name: Goodpasture, Ann L. (Miss)

Date: 30 September 1945

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment:

Nature of action: Separation (transfer)\*

Effective date: 30 September 1945 COB

	FROM-	TO-
Position.....	Clerk-Stenographer	
Grade and salary..	CAF-5, \$2320 per annum**	
Branch.....	Research & Analysis	
Division.....	Far East	
Section.....		
Headquarters.....	Chungking, China	
Departmental or Field.....	Field	

## REMARKS:

\*To State Department in accordance with Executive Order 9621, dated 20 September 1945.

\*\*Living and quarters allowance at the base rate of \$1500 per annum plus \$600 per annum when government quarters are not provided.

- ☒ Subject to 5% deduction for the Civil Service Retirement and Disability Fund.
- ☐ This appointment is for such time as your services may be required and funds are available for the work of OSS.
- ☐ This transfer is for the best interests of the Government. Reimbursement of your expenses and cost of transfer of your household effects is authorized in accordance with existing orders and regulations.

*C. J. Francis*  
\_\_\_\_\_  
Chief, Civilian Personnel

PERSONNEL FOLDER COPY

CSC Report No. Field
Civil Service or Other Legal Authority
Appropriation 1161300 C 2201-46
Date of birth 11/28/1913
Legal residence Oklahoma
Sex Female
NATURE OF POSITION
V
IA
VV
New
Annual Post Allowance
SUBJECT TO-
Investigation..... <input type="checkbox"/>
1 year trial period..... <input type="checkbox"/>

**OFFICE OF STRATEGIC SERVICES**  
WASHINGTON, D. C.

Name: Goodpasture, Ann L. (Miss)

Date: May 31, 1945

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment.

Nature of action: Excepted Appointment

Effective date: June 1, 1945

DOO-2/29/44

Position.....	Clerk-Stenographer
Grade and salary.....	GAF-5, \$2000 per annum*
Branch.....	Research & Analysis
Division.....	
Section.....	
Headquarters.....	New Delhi, India
Departmental or field.....	Field

Remarks: \* Plus living allowance at the rate established by the Strategic Services Officer not to exceed \$1377.00 per annum authorized by Budget Circular A-8.

This action is subject to the provisions of paragraphs checked below:

☒ Under this appointment you are subject to the provisions of the Civil Service Retirement Act as amended, and accordingly 5% will be deducted from your basic salary for deposit to your credit in the Retirement Fund.

☒ This appointment is for such time as your services may be required and funds are available for the work of the Office of Strategic Services.

*William L. Tamm*  
Director of Personnel

PERSONNEL FOLDER COPY

C. S. C. Report No.	
Field	
Civil Service or other legal authority	
Schedule A-1-7	
Appropriation 1151500 8322-45	
Date of birth 11/28/1918	
Legal residence Oklahoma	
Sex Female	
NATURE OF POSITION	
New  X	Additional identical
Vice	Vice vacancy
Reference (Name, number, and date, etc.) F-5018 6/1/45 310	
Subject to Retirement Act? Yes	

**OFFICE OF STRATEGIC SERVICES**  
WASHINGTON, D. C.

Name: **Goodpasture, Ann L. (Miss)**Date: **May 31, 1948**

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment.

Nature of action: **Termination \***Effective date: **May 31, 1948 COB**

	FROM—	TO—
Position.....	<b>Clerk-Stenographer</b>	
Grade and salary.....	<b>GAF-5, \$2000 per annum</b>	
Branch.....	<b>Research &amp; Analysis</b>	
Division.....		
Section.....		
Headquarters.....	<b>New Delhi, India</b>	
Departmental or field.....	<b>Field</b>	

Remarks: \* **To accepted An Excepted Appointment, Schedule A-1-7.**

This action is subject to the provisions of paragraphs checked below:

- ☒ Under this appointment you are subject to the provisions of the Civil Service Retirement Act as amended, and accordingly 5% will be deducted from your basic salary for deposit to your credit in the Retirement Fund.
- ☒ This appointment is for such time as your services may be required and funds are available for the work of the Office of Strategic Services.

C. S. C. Report No. <b>Field</b>	
Civil Service or other legal authority	
Appropriation <b>1151300 8322-48</b>	
Date of birth <b>11/28/1918</b>	
Legal residence <b>Oklahoma</b>	
Sex <b>Female</b>	
NATURE OF POSITION	
New	Additional identical
Vice	Vice vacancy
Reference (Name, number, and date, etc.)	
Subject to Retirement Act? <b>Yes</b>	

OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.

Name: Goodpasture, Ann L. (Miss)

Date: March 1, 1945

C. S. C. Report No.

Field

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment.

Nature of action: Transfer and Promotion and Change in Limitation

Effective date: March 1, 1945

	FROM	TO
Position	Clerk-Stenographer	Clerk-Stenographer
Grade and salary	CAF-4, \$1800 per annum	CAF-5, \$2000 per annum
Branch	Civilian Personnel	Research and Analysis
Division	Training	
Section		
Headquarters	Washington, D. C.	New Delhi, India
Departmental or field	Field	Field

Civil Service or other legal authority

Dept. Cir. 257

Rev. #

Schedule A-1-7

Appropriation

1151300

8322445

Date of birth

11/23/1918

Legal residence

Oklahoma

Sex

Female

## NATURE OF POSITION

New

Additional identical

X

Vice

Vice vacancy

Reference  
(Name, number, and date, etc.)

9/30/44

Subject to Retirement Act?

Yes

Remarks: • Plus living allowance at the rate established by the Strategic Services Officer not to exceed \$1377.00 per annum authorized by Budget Circular A-8.

This action is subject to the provisions of paragraphs checked below: 63 to PR 3/2/45

☒ Under this appointment you are subject to the provisions of the Civil Service Retirement Act as amended, and accordingly 5% will be deducted from your basic salary for deposit to your credit in the Retirement Fund.

☒ This appointment is for such time as your services may be required and funds are available for the work of the Office of Strategic Services.

*William B. McEntee Jr.*  
Director, Personnel

**OFFICE OF STRATEGIC SERVICES  
WASHINGTON, D. C.**

Name: **Goodpasture, Ann L. (Miss)**Date: **September 15, 1944**

C. S. C. Report No.

**Field(a)**

This is to notify you that the Office of Strategic Services has taken the following action concerning your employment.

Nature of action: **Transfer and Change in Limitation**Effective date: **September 16, 1944**

	FROM--	TO--
Position	<b>Clerk-Stenographer</b>	<b>Clerk-Stenographer</b>
Grade and salary	<b>CAF-4, \$1800 per annum B-#1381 CSC#68</b>	<b>CAF-4, \$1800 per annum</b>
Branch	<b>Research and Analysis</b>	<b>Civilian Personnel</b>
Division	<b>Far East</b>	<b>Training</b>
Section	<b>Military Supply</b>	
Headquarters	<b>Washington, D.C.</b>	<b>Washington, D.C.</b>
Departmental or field	<b>Departmental</b>	<b>Field*</b>

Civil Service or other legal authority

Appropriation

**1151300.002****6005-45****From #2234**

Date of birth

**11/28/1918**

Legal residence

**Oklahoma**

Sex

**Female**

NATURE OF POSITION

New

Additional identical

**X**

Vice

Vice vacancy

Reference  
(Name, number, and date, etc.)**9/6/44**

Subject to Retirement Act?

**Yes**

Remarks:

**\*Pending transfer overseas.****Subject to investigation.**

This action is subject to the provisions of paragraphs checked below:



Under this appointment you are subject to the provisions of the Civil Service Retirement Act as amended, and accordingly 5% will be deducted from your basic salary for deposit to your credit in the Retirement Fund.



This appointment is for such time as your services may be required and funds are available for the work of the Office of Strategic Services.

*W. H. K. Linder*

Director of Personnel

EDM:mbg

**OFFICE OF STRATEGIC SERVICES  
COORDINATOR OF INFORMATION  
WASHINGTON, D. C.**

Name: Goodpasture, Ann L. (Kiss)

Date: February 29, 1944

This is to notify you that the Coordinator of Information has taken the following action concerning your employment.

Nature of action: Appointment by Transfer

Effective date: February 29, 1944 - EOD

	FROM-	TO-
Position	Clerk-Stenographer	Clerk-Stenographer
Grade and salary	CAF-3, \$1620 per annum	CAF-4, \$1800 per annum
Branch	War Relocation Authority	Research and Analysis
Division	Personnel Management	Far East
Section	Replacement and Training	Military Supplies
Headquarters	Washington, D.C.	Washington, D. C.
Departmental or field	Departmental	Departmental

## Remarks:

This appointment is subject to a favorable report of the character investigation being made by the United States Civil Service Commission

A copy of the United States Civil Service Commission authorization is enclosed.

*63c sent to Payroll  
63d to Clerk  
2/29/44*

This action is subject to the provisions of paragraphs checked below:

☐ Under this appointment you are subject to the provisions of the Civil Service Retirement Act as amended, and accordingly ~~2%~~ 5% will be deducted from your basic salary for deposit to your credit in the Retirement Fund. 5%

☒ This appointment is for such time as your services may be required and funds are available for the work of the office of the Coordinator of Information.

PERSONNEL FOLDER COPY

C. S. C. Report No.

9861

Civil Service or other legal authority

DOA: 2/21/44

Reg. IX, Sec. 2a

E.O. 9243

File D-9834

Appropriation

1141300

2207-44

Date of birth

11/23/1918

Legal residence

Oklahoma

Sex

Female

## NATURE OF POSITION

New

Additional identification

Vice

Vice vacancy

X

Reference (Name, number, and date, etc.)

2/1/43

En. #1381

CSC #68

Subject to Retirement Act?

Yes

EDH:deb



SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				057303			
<b>SECTION A GENERAL</b>							
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE	5. SD	
GOODPASTURE ANN L.		11/28/18		F	13	D	
6. OFFICIAL POSITION TITLE				7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION	
Ops Officer				DDP/CI/OPS		Washington, D.C.	
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY				<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR			
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE			
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
30 November 1971				18 October 1970 - 31 October 1971			
<b>SECTION B PERFORMANCE EVALUATION</b>							
<p><b>U-Unsatisfactory</b> Performance is unacceptable. A rating in this category requires immediate and positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>M-Marginal</b> Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p><b>P-Proficient</b> Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p><b>S-Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O-Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Monitors all operational correspondence from the Far East Division Stations for counterintelligence leads and evidence of hostile espionage operations.							RATING LETTER
SPECIFIC DUTY NO. 2 Reviews field project outlines for evidence of penetrations, provocations, or foreign intelligence relationships. Advises Headquarters officers in preparation of security reviews. Represents CI Staff at DDP project review meetings when the senior officer is not available.							RATING LETTER
3 Alternate Headquarters case officer to the Chief, CIOPS/FE for sensitive Prescribed and Limited Distribution counterintelligence projects handled by CI Staff.							RATING LETTER
SPECIFIC DUTY NO. 4 Coordinates cables and dispatches from FE Division Headquarters to field stations on CI cases and agent clearances.							RATING LETTER
SPECIFIC DUTY NO. 5 Maintains background files for use in consultation with FE Division officers on CI problems.							RATING LETTER
SPECIFIC DUTY NO. 6 Prepares for Chief, CI, summaries of counterintelligence incidents which suddenly develop such as arrests, defections, and newspaper exposures.							RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER

SECRET

Reviewed by OP/SPD/FRS

SECRET

(When Filled In)

## SECTION C

## NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

FEB 17 2 30 PM '72

See memorandum in lieu of Fitness Report.

## SECTION D

## CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE


SECRET

SECRET

MEMORANDUM IN LIEU OF FITNESS REPORT

SUBJECT: Ann L. GOODPASTURE  
18 October 1970 - 31 October 1971

To the immense regret of this writer Ann Goodpasture is retiring very soon. It would be silly to rate her competitively against any of her colleagues, male or female, young or merely well-preserved. Concerning her fitness be it recorded that she is very fit indeed to perform any of the tasks listed as her current ones or almost any others I can think of at almost any grade. I venture to rate her over-all performance, thirty years of it, as OUTSTANDING. Ann is one of the tough warp-threads on which this organization is woven, and when she retires the fabric of this organization will be weakened.

  
William R. Johnson  
Chief, CI/OPS/FE

EMPLOYEE SIGNATURE:


  
Ann L. Goodpasture

16 FEB 1972

Date

COMMENTS OF REVIEWING OFFICIAL:

Miss Goodpasture is indeed a fine officer who consistently turns in a Strong performance when she is not doing an outstanding job. She is an excellent office and project manager who is cost conscious and she is a careful thorough instructor and briefer. Her retirement will leave a great gap in CI/OPS and, as Mr. Johnson has said, in the organization. I hope she gets the official Agency recognition she deserves for the many years she has made substantive contribution to the CS.

  
N. Scott MILER  
Chief, CI Operations

SECRET

17.2.72.

~~S-E-C-R-E-T~~

Cable Writing Refresher

Training Certification

TO: Registrar, Office of Training

I certify that I completed the Cable Writing Refresher No. 1  
on 23 April 1956.

Ann L Goodenough

Name

IDE

Staff or Division

~~S-E-C-R-E-T~~

MAY  
1956S-E-C-R-E-TTRAINING EVALUATIONCOUNTERESPIONAGE OPERATIONS COURSE No. 1

NAME	SEX	DATE OF COURSE	NO. OF STUDENTS
Goodpasture, Ann L.	Female	19 March - 6 April 1956	15
DATE OF BIRTH	LOC DATE	GRADE OR RANK	OFFICE
28 November 1918	February 1944	GS-11	WE/FI
PROMOTED ASSIGNMENT OR PRESENT POSITION			
FI Operations Officer			

I. Course Objectives: to familiarize the student with the various types of CE operations and with methods and procedures peculiar to CE in the field and at Headquarters; to outline CE objectives, and to increase proficiency in the recognition and exploitation of leads.

II. Course Characteristics: The Counterespionage Operations Course is of three weeks' duration. The curriculum material is presented by means of lectures, seminars, and directed reading. It is divided into sections as follows:

- A. Introduction (definition of terms, the CI Staff, operational Security and risk assessment, sources of CI leads, CI reporting and records)
- B. Interrogation
- C. Foreign Intelligence Services (with emphasis on currently hostile services including a lecture on CE in Liaison)
- D. Penetration and Defection
- E. Double Agent Operations

During the course each student is required to present orally a CE case and to submit a written version of the case. Evaluations are based on problems, the case analysis presented by the student, and objective tests.

S-E-C-R-E-T

~~SECRET~~

### III. Evaluation

A. Two double agent problems requiring case analysis. This analysis involves thorough study of the case:

1. To determine areas of missing, inadequate, or questionable information
2. To pick out information which can be checked through other sources
3. To recognize all possible leads
4. To assess the risk involved
5. To propose appropriate action (operational decisions)

	Fail	Poor	Satis	Exc	Sup
Ratings in this class			12*	3	

B. Case analysis (student presentation):

	Fail	Poor	Satis	Exc	Sup
Ratings in this class			10	5*	

C. Objective tests based on all sections of the course:

	Fail	Poor	Satis	Exc	Sup
Ratings in this class		3	5*	4	

This student's rating is indicated by asterisk.

S-E-C-R-E-T

S-E-C-R-E-T

- IV. COMMENTS: Miss Goodpasture's handling of the problems indicated that she is capable of shrewd analysis. She overlooked some points which might have been considered in one problem and dealt with the other problem in too brief fashion, but in general her analysis reflected her actual experience and suggested that she is perhaps stronger in analysis than in making operational decisions. She presented a rather complex case and demonstrated that she not only understood the case but was able to give a clear account of it.

V. EXPLANATION OF ADJECTIVAL RATINGS:

SUPERIOR The student demonstrated outstanding ability or proficiency in meeting this course goal or objective; he indicated an unusually thorough knowledge of the material presented, or, if skills are involved, he demonstrated that he is one of the most effective individuals in this area.

EXCELLENT The student showed unusual competence, skill, or ability in meeting this objective or goal; he demonstrated a thorough grasp of the presented material, or if skills are involved, he demonstrated that he can perform in an extremely effect manner in this area.

SATISFACTORY The student met this objective in a competent and adequate manner; he demonstrated a good understanding and grasp of the information presented, or, if skills are involved, he demonstrated sufficient competence to operate effectively in this area.

POOR Although the student may have met some of the standards set for minimum achievement of this course goal or objective, he demonstrated serious gaps in knowledge or sufficient lack of skill to be of doubtful competence.

FAILURE The student was unable to grasp the concepts or information presented, or demonstrated that he had not acquired the necessary information and skills to operate at even minimum capacity in this area.

FOR THE DIRECTOR OF TRAINING:

*Alfonso Rodriguez*  
Chief Instructor  
COUNTERESPIONAGE OPERATIONS COURSE

*Shown to subject on 7 May. 1956.  
F.B. Coleman  
CIN EIFT*

S-E-C-R-E-T

SECRET

CUMULATIVE TRAINING RECORD						DATE 24 Sept. 56 18 Oct. 56	
NAME Ann L. Goodpasture				PROJECTED PERSONNEL ACTION			
				PROMOTION		REASSIGNMENT	
				ROTATION		TRAVEL	
FROM: IO (PI) 09-11				TO: IO (PI) 09-12		EOD Feb. '44	
X	COURSE	DATE TAKEN	X	COURSE	DATE TAKEN	REMARKS:	
	BASIC ORIENT. ALSO BIC. BIC. SOC. BTP. PH I	49		AIR OPS. 1 2 3 4 5		1. CONSTRUCTIVE CREDIT (CC) HAS BEEN AUTHORIZED FOR COURSES SO MARKED BASED UPON SUBJECT'S PREVIOUS <input type="checkbox"/> BACKGROUND <input type="checkbox"/> EXPERIENCE <input type="checkbox"/> TRAINING.	
	CLAND. M-B T ALSO OC. PH II			WAR. OPS. 1 2 3 4 5		2. SUBJECT HAS COMPLETED TRAINING OR RECEIVED CONSTRUCTIVE CREDIT AS SHOWN AT THE LEFT.	
	CLAND. OPS. ALSO AIC. AITC. AOC. CAT. PH III	49		CLAND. FLD. ACT. 1 2 3 4 5 6		TRAINING OFFICER COMMENTS:	
	RESISTANCE OPS. ALSO PH. I-II- III RAFT			SURVIVAL 1 2 3 4 5 6		<input checked="" type="checkbox"/> A. THIS DOES (NOT) MEET TRAINING STANDARDS RE QUALIFICATION FOR THE PROJECTED ACTION.	
	CLAND. SERV. REV.			BASIC PHOTO	46	<input type="checkbox"/> NO FURTHER TRAINING RECOMMENDED AT THIS TIME.	
	WORLD COMMUNISM	PO 51		DOCUMENTATION		<input type="checkbox"/> B. SUBJECT IS CURRENTLY ENROLLED IN COURSES MARKED WITH AN "S". THE COMPLETION OF WHICH WILL SATISFY BASIC QUALIFYING STANDARDS.	
	ANTI-COMM. OPS.			LOCKS	46 51	<input type="checkbox"/> C. UNLESS SUBJECT HAS HAD PREVIOUS HQ. OR FIELD EXPERIENCE WHICH CAN BE ACCEPTED IN LIEU OF TRAINING, SUBJECT SHOULD BE REQUIRED TO TAKE	
	ADMIN PROCEDURES	51		SECRET WRITING	51	<input type="checkbox"/> QUALIFYING <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT:	
	OPS. SUPPORT			FLAPS & SEALS		<input type="checkbox"/> SOONEST <input type="checkbox"/> UPON RETURN TO HQ.	
	TRADECRFT PHASE			SMALL ARMS FAM.		<input type="checkbox"/> D. WAIVER AND CC. SHOULD BE REQUESTED FOR THOSE COURSES MARKED WITH A "W".	
	ADMIN PHASE			OTHER TRAINING		<input type="checkbox"/> E. RECOMMENDATIONS FOR ADDITIONAL TRAINING WERE MADE DATE THESE RECOMMENDATIONS HAVE NOT BEEN MET.	
	REPORTS			OSO	47	DIVISION TRAINING OFFICER	
	ORDER OF BATTLE	cc 8/55		Table 44g	23 Sep 56	STAFF TRAINING OFFICER	
	COUNTERESPIONAGE	11/11/55				Signature of Staff Training Officer	
	ADV. COUNTER-ESPIONAGE						
	OPS. SECURITY						
	WAR PLANS						
	CLAND. POL. WARF.						
	STAYBEHIND OPS.						
	TECH. DEV. ORIENT.						
	INSTR. TECH.						
	EVASION-ESCAPE						
	SAD. OPS.						
	INVEST. TECH. ALSO CI TECH.						
	ADMIN REFRESHER						
	ROG. IMPROVE.						
	BASIC SUPV.						
	BASIC MGMT.			PRE-TEST			
	BALLOON OPS.			ASSESSMENT			
TO: Personnel Officer,				FROM: Career Management Officer			
<p>The above projected personnel action has been <input checked="" type="checkbox"/> approved <input type="checkbox"/> disapproved by the Career Service Board. Additional training as indicated above has been recommended by the Training Officer to satisfy requirements of the proposed personnel action.</p> <p>Please schedule these courses as soon as possible through your Division Training Officer who will coordinate with the Senior Staff Training Officer.</p>							
DATE 23 September 1956				SIGNATURE OF CAREER MANAGEMENT OFFICER R.H. G.			



SECRET

(When Filled In)

## FITNESS REPORT (Part I) PERFORMANCE

## INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in item A, of Section "A" below.

## SECTION A.

## GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
Goodpasture Ann L.	28 Nov 1918	F	FI
5. OFFICE/DIVISION BRANCH OF ASSIGNMENT		6. OFFICIAL POSITION TITLE	
DDP/WE/FI Staff		Ops Officer (CE)	
7. GRADE	8. DATE REPORT DUE IN OF	9. PERIOD COVERED BY THIS REPORT (inclusive dates)	
GS-11	18 May 1956	1 Dec 1955 to 18 May 1956	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	

## SECTION B.

## CERTIFICATION

1. FOR THE RATER: THIS REPORT ☐ HAS ☐ HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT.

A. CHECK (X) APPROPRIATE STATEMENTS:

<input checked="" type="checkbox"/>	THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "I" IN C1 OR D, A WARNING LETTER WAS SENT TO HIM SA COPY ATTACHED TO THIS REPORT.
<input type="checkbox"/>	THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW I EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
<input checked="" type="checkbox"/>	I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

B. THIS DATE

7 June 1956

C. TYPED OR PRINTED NAME AND SIGNATURE

Thomas F. Thiele

SUPERVISOR

D. SUPERVISOR'S OFFICIAL TITLE

DC/WE/FI

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

BY	DATE
Posted Pos Control	7 June 1956
Reviewed by	

☐ CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE

7 June 1956

B. TYPED OR PRINTED NAME AND SIGNATURE OF REVIEWING OFFICIAL

Francis G. Coleman

C. OFFICIAL TITLE OF REVIEWING OFFICIAL

C/WE/FI

## SECTION C.

## JOB PERFORMANCE EVALUATION

1. RATING ON GENERAL PERFORMANCE OF DUTIES

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the rating period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

5 INSERT RATING NUMBER	1 - DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
	2 - BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES.
	3 - PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEARINESS.
	4 - PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER.
	5 - A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
	6 - PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR.

COMMENTS:

## SECRET

(When Filled In)

2. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES																											
<p><b>DIRECTIONS:</b></p> <p>a. State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties.</p> <p>b. Rate performance on each specific duty considering ONLY effectiveness. Do not rate on supervisors those who supervise a secretary only.</p> <p>c. For supervisors, ability to supervise will always be rated as a specific duty. Do not rate as supervisors those who supervise a secretary only.</p> <p>d. Compare in your mind, when possible, the individual being rated with others performing the same duty at a similar level of responsibility.</p> <p>e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties.</p> <p>f. Be specific. Examples of the kind of duties that might be rated are:</p> <table border="0"> <tr> <td>ORAL BRIEFING</td> <td>HAS AND USES AREA KNOWLEDGE</td> <td>CONDUCTS INTERROGATIONS</td> </tr> <tr> <td>GIVING LECTURES</td> <td>DEVELOPS NEW PROGRAMS</td> <td>PREPARES SUMMARIES</td> </tr> <tr> <td>CONDUCTING SEMINARS</td> <td>ANALYZES INDUSTRIAL REPORTS</td> <td>TRANSLATES GERMAN</td> </tr> <tr> <td>WRITING TECHNICAL REPORTS</td> <td>MANAGES FILES</td> <td>DEBRIEFING SOURCES</td> </tr> <tr> <td>CONDUCTING EXTERNAL LIAISON</td> <td>OPERATES RADIO</td> <td>KEEPS BOOKS</td> </tr> <tr> <td>TYPING</td> <td>COORDINATES WITH OTHER OFFICES</td> <td>DRIVES TRUCK</td> </tr> <tr> <td>TAKING DICTATION</td> <td>WRITES REGULATIONS</td> <td>MAINTAINS AIR CONDITIONING</td> </tr> <tr> <td>SUPERVISING</td> <td>PREPARES CORRESPONDENCE</td> <td>EVALUATES SIGNIFICANCE OF DATA</td> </tr> </table> <p>g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.</p>				ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	CONDUCTS INTERROGATIONS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
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SPECIFIC DUTY NO. 1	RATING NUMBER	SPECIFIC DUTY NO. 4	RATING NUMBER																								
Makes CE Analysis of Cases	6	Assists in the Preparation of CE Notebooks	5																								
SPECIFIC DUTY NO. 2	RATING NUMBER	SPECIFIC DUTY NO. 5	RATING NUMBER																								
Prepares Case Summaries	4																										
SPECIFIC DUTY NO. 3	RATING NUMBER	SPECIFIC DUTY NO. 6	RATING NUMBER																								
Assists in Reviewing and Releasing Correspondence	5																										
3. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE																											
<p><b>DIRECTIONS:</b> Stress strengths and weaknesses, particularly those which affect development on present job.</p> <p>Miss Goodpasture has a natural aptitude for analysis, a shrewd and inquiring mind, and an enthusiasm for FI/CE work. She is markedly interested in CIA and its mission, well-informed, and energetic. She displays an intelligent initiative and makes good use of her extensive agency experience. She has no significant weaknesses, but could use to advantage more experience in case-summary type writing.</p>																											
SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION																											
<p><b>DIRECTIONS:</b> Take into account here everything you know about the individual....productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents....and how he fits in with your team. Compare him with others doing similar work of about the same level.</p> <table border="0"> <tr> <td>1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED</td> <td></td> </tr> <tr> <td>2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW</td> <td></td> </tr> <tr> <td>3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION</td> <td></td> </tr> <tr> <td>4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION</td> <td></td> </tr> <tr> <td>5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS</td> <td></td> </tr> <tr> <td>6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION</td> <td></td> </tr> <tr> <td>7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION</td> <td></td> </tr> </table>				1 - DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED		2 - OF DOUBTFUL SUITABILITY...WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW		3 - A BARELY ACCEPTABLE EMPLOYEE...BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION		4 - OF THE SAME SUITABILITY AS MOST PEOPLE I KNOW IN THE ORGANIZATION		5 - A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS		6 - AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE ORGANIZATION		7 - EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE ORGANIZATION											
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<p>IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YES, EXPLAIN FULLY:</p> <p>Miss Goodpasture has recently accepted a position in NEA which offers her greater opportunity than the job for which this report is made.</p>																											

SECRET

S-E-C-R-E-T

TRAINING EVALUATION

COUNTERESPIONAGE OPERATIONS COURSE No. 1

NAME	SEX	DATES OF COURSE	NO. OF STUDENTS
Goodpasture, Ann L.	Female	19 March - 6 April 1955	15
DATE OF BIRTH	EDUCATION	GRADE OR RANK	OFFICE
23 November 1918	February 1944	GS-11	WE/PI
PROPOSED ASSIGNMENT OR PRESENT POSITION			
PI Operations Officer			

- I. Course Objectives: to familiarize the student with the various types of CS operations and with methods and procedures peculiar to CE in the field and at Headquarters, to outline CE objectives, and to increase proficiency in the recognition and exploitation of leads.
- II. Course Characteristics: The Counterespionage Operations Course is of three weeks' duration. The curricula material is presented by means of lectures, seminars, and directed reading. It is divided into sections as follows:
- A. Introduction (definition of terms, the CI Staff, operational security and risk assessment, sources of CE leads, CE reporting and records)
  - B. Interrogation
  - C. Foreign Intelligence Services (with emphasis on currently hostile services including a lecture on CE in Liaison)
  - D. Penetration and Defection
  - E. Double Agent Operations

During the course each student is required to present orally a CE case and to submit a written version of the case. Evaluations are based on problems, the case analysis presented by the student, and objective tests.

S-E-C-R-E-T

~~SECRET~~

### III. Evaluation

A. Two double agent problems requiring case analysis. This analysis involves thorough study of the case:

1. To determine areas of missing, inadequate, or questionable information
2. To pick out information which can be checked through other sources
3. To recognize all possible leads
4. To assess the risk involved
5. To propose appropriate action (operational decisions)

	Fail	Poor	Satis	Exc	Sup
Ratings in this class			12*	3	

B. Case analysis (student presentation):

	Fail	Poor	Satis	Exc	Sup
Ratings in this class			10	5*	

C. Objective tests based on all sections of the course:

	Fail	Poor	Satis	Exc	Sup
Ratings in this class		3	8*	4	

This student's rating is indicated by asterisk.

S-E-C-R-E-T

S-E-C-R-E-T

- IV. CONCLUSION: Miss Goodpasture's handling of the problem indicated that she is capable of shrewd analysis. She overlooked some points which might have been considered in one problem and dealt with the other problem in too brief fashion, but in general her analysis reflected her actual experience and suggested that she is perhaps stronger in analysis than in making operational decisions. She presented a rather complex case and demonstrated that she not only understood the case but was able to give a clear account of it.

V. EXPLANATION OF ADJECTIVAL RATINGS:

SUPERIOR The student demonstrated outstanding ability or proficiency in meeting this course goal or objective; he indicated an unusually thorough knowledge of the material presented, or, if skills are involved, he demonstrated that he is one of the most effective individuals in this area.

EXCELLENT The student showed unusual competence, skill, or ability in meeting this objective or goal; he demonstrated a thorough grasp of the presented material, or if skills are involved, he demonstrated that he can perform in an extremely effective manner in this area.

SATISFACTORY The student met this objective in a competent and adequate manner; he demonstrated a good understanding and grasp of the information presented, or, if skills are involved, he demonstrated sufficient competence to operate effectively in this area.

POOR Although the student may have met some of the standards set for minimum achievement of this course goal or objective, he demonstrated serious gaps in knowledge or sufficient lack of skill to be of doubtful competence.

FAILURE The student was unable to grasp the concepts or information presented, or demonstrated that he had not acquired the necessary information and skills to operate at even minimum capacity in this area.

FOR THE DIRECTOR OF TRAINING:

*Thomas H. Rodriguez*  
Chief Instructor  
COUNTERESPIONAGE OPERATIONS COURSE

S-E-C-R-E-T

**SECRET**  
(When Filled In)

### FITNESS REPORT

The Fitness Report is an important factor in agency personnel management. It serves to provide:

1. The agency selection board with information of value when considering the appointment of an individual for membership in the career service; and
2. A periodic record of job performance as an aid to the effective utilization of personnel.

#### INSTRUCTIONS

**TO THE ADMINISTRATIVE OR PERSONNEL OFFICER:** Consult current administrative instructions regarding the evaluation and transmittal of this report.

**TO THE SUPERVISOR:** Read the entire form before attempting to complete any item. As the supervisor who assigns, directs and reviews the work of the individual, you have primary responsibility for evaluating his strengths, weaknesses, and on-the-job effectiveness as revealed by his day-to-day activities. If this individual has been under your supervision for less than 30 days, you will collaborate with his previous supervisors to make sure the report is accurate and complete. Primary responsibility rests with the current supervisor. It is required that, throughout the period this individual has been under your supervision, you have discharged your supervisory responsibilities by frequent discussions of his work, so that in a general way he knows where he stands.

**CODED**

13 DEC 1955

Reviewed by PUD

IT IS OPTIONAL WHETHER OR NOT THIS FITNESS REPORT IS SHOWN TO THE PERSON BEING RATED.

#### SECTION I (To be filled in by Administrative Officer)

1. NAME (Last) <b>GOODPASTURE</b>	(First) <b>Ann</b>	(Middle) <b>L</b>	2. DATE OF BIRTH <b>28 Nov 1918</b>	3. SEX <b>F</b>	4. CAREER DESIGNATION <b>DI</b>
5. DATE OF ENTRANCE ON DUTY <b>Feb 1944</b>	6. OFFICE ASSIGNED TO <b>DDP</b>	7. DIVISION <b>WE</b>		8. BRANCH <b>FI Staff</b>	
9. NATURE OF ASSIGNMENT <input checked="" type="checkbox"/> DEPARTMENTAL <input type="checkbox"/> FIELD		10. IF FIELD, SPECIFY STATION:		11. GRADE <b>GS-11</b>	
12. DATE THAT THIS REPORT IS DUE <b>1 December 1955</b>		13. PERIOD COVERED BY THIS REPORT (Inclusive dates) <b>February, 1955-1 December 1955</b>			

#### SECTION II (To be filled in by Supervisor)

1. CURRENT POSITION <b>OPS. Off. (CE) 013252</b>	2. DATE ASSUMED RESPONSIBILITY FOR POSITION
3. WHAT SPECIFIC ASSIGNMENTS OR TASKS ARE TYPICAL OF THOSE GIVEN TO HIM DURING THE PAST THREE TO SIX MONTHS (List in order of frequency):	

- To help select and to carry out detailed operational reviews and security critiques of operations, particularly those involving the RIS.
- To analyze and recommend procedures in connection with operational security problems.
- When required, to review and to release Division dispatch traffic.
- To serve as the Division's ~~IA~~ defector coordinator.
- To assist in processing STD clearances for the Division.
- To assist the Division C/FI as required.

READ THE ENTIRE FORM BEFORE ATTEMPTING TO COMPLETE ANY ITEM

#### SECTION III

I certify that, during the latter half of the period covered by this report, I have discussed with the rated individual the manner in which he has performed his job and provided suggestions and criticisms wherever needed. I believe that his understanding of my evaluation of his performance is consistent with my evaluation of him as evidenced by this fitness report and I have informed him of his strengths, weaknesses, and on-the-job effectiveness. If performance during the report period has been unsatisfactory, there is attached a copy of the memorandum notifying him of unsatisfactory performance.

This report ☒ has ☐ has not been shown to the individual rated.

THIS DATE <b>Dec. 7, 1955</b>	NAME AND SIGNATURE OF RATER (Employee's immediate supervisor) <b>Thomas F. White</b>
I HAVE REVIEWED THIS REPORT (Check "Yes" if any are reflected by attached memorandum)	
THIS DATE <b>7. XII. 55</b>	NAME AND SIGNATURE OF REVIEWING OFFICIAL (Official next higher in line of authority) <b>Thornehouse DC/WE</b>

SECRET  
(When Filled In)

OFFICE OF PERSONNEL

SECTION IV

This section is provided as an aid in describing the individual. Your description is not favorable or unfavorable in itself but acquires its meaning in relation to a particular job or assignment. The description is to be interpreted literally.

On the left-hand side of the page below are a series of statements that apply in some degree to most people. On the right-hand side of the page are four major categories of descriptions. The scale within each category is divided into three small blocks; this is to allow you to make finer distinctions if you so desire. Look at the statement on the left - then check the category on the right which best tells how much the statement applies to the person you are rating. Placing an "X" in the "Not Observed" column means you have no opinion on whether a phrase applies to an individual. Placing an "X" in the "Does Not Apply" column means that you have the definite opinion that the description is not at all suited to the individual.

STATEMENTS	NOT OBSERVED	CATEGORIES				
		DOES NOT APPLY	APPLIES TO A LIMITED DEGREE	APPLIES TO A REASONABLE DEGREE	APPLIES TO AN AVERAGE DEGREE	APPLIES TO AN OUTSTANDING DEGREE
A. ABLE TO SEE ANOTHER'S POINT OF VIEW.			X			
B. PRACTICAL.					X	
1. A GOOD REPORTER OF EVENTS.					X	
2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES.						X
3. CAUTIOUS IN ACTION.				X		
4. WAS INITIATIVE.						X
5. UNEMOTIONAL.					X	
6. ANALYTIC IN HIS THINKING.						X
7. CONSTANTLY STRIVING FOR NEW KNOWLEDGE AND IDEAS.					X	
8. GETS ALONG WITH PEOPLE AT ALL SOCIAL LEVELS.					X	
9. HAS SENSE OF HUMOR.					X	
10. KNOWS WHEN TO SEEK ASSISTANCE.					X	
11. CALM.					X	
12. CAN GET ALONG WITH PEOPLE.					X	
13. MEMORY FOR FACTS.					X	
14. GETS THINGS DONE.						X
15. KEEPS ORIENTED TOWARD LONG TERM GOALS.					X	
16. CAN COPE WITH EMERGENCIES.					X	
17. HAS HIGH STANDARDS OF ACCOMPLISHMENT.					X	
18. HAS STAMINA; CAN KEEP GOING A LONG TIME.					X	
19. HAS WIDE RANGE OF INFORMATION.					X	
20. SHOWS ORIGINALITY.						X
21. ACCEPTS RESPONSIBILITIES.						X
22. ADMITS HIS ERRORS.					X	
23. RESPONDS WELL TO SUPERVISION.						X
24. EVEN DISPOSITION.					X	
25. ABLE TO DO HIS JOB WITHOUT STRONG SUPPORT						X

SECRET

**SECRET**



**SECRET**  
(When Filled In)

C. INDICATE IF YOU THINK THAT ANY SINGLE STRENGTH OR WEAKNESS OUTWEIGNS ALL OTHER CONSIDERATIONS.

An interest in and capacity for FI/CE work.

**OFFICE OF PERSONNEL**

D. DO YOU FEEL THAT HE REQUIRES CLOSE SUPERVISION? ☒ NO ☐ YES. IF YES, WHY?

DEC 13 11 00 AM '55

**MAIL ROOM**

E. WHAT TRAINING DO YOU RECOMMEND FOR THIS INDIVIDUAL?

Advanced OE training is planned for her.

F. OTHER COMMENTS (Indicate here general traits, specific habits or characteristics not covered elsewhere in the report but which have a bearing on effective utilization of this person):

None

### SECTION VI

*Read all descriptions before rating. Place "X" in the most appropriate box under subsections A, B, C, & D.*

A. DIRECTIONS: Consider only the skill with which the person has performed the duties of his job and rate him accordingly.

- ☐ 1. DOES NOT PERFORM DUTIES ADEQUATELY; HE IS INCOMPETENT.
- ☐ 2. BARELY ADEQUATE IN PERFORMANCE; ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES COMPETENTLY.
- ☐ 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY; OCCASIONALLY REVEALS SOME AREA OF WEAKNESS.
- ☐ 4. PERFORMS DUTIES IN A TYPICALLY COMPETENT, EFFECTIVE MANNER.
- ☒ 5. A FINE PERFORMANCE; CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL.
- ☐ 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE RATER.

IS THIS INDIVIDUAL BETTER QUALIFIED FOR WORK IN SOME OTHER AREA? ☒ NO ☐ YES. IF YES, WHAT?

C. DIRECTIONS: Based upon what he has said, his actions, and any other indications, give your opinion of this person's attitude toward the agency.

- ☐ 1. HAS AN ANTAGONISTIC ATTITUDE TOWARD THE AGENCY... WILL DEFINITELY LEAVE THE AGENCY AT THE FIRST OPPORTUNITY.
- ☐ 2. HAS STRONG NEGATIVE ATTITUDE TOWARD AGENCY... IRKED BY RESTRICTIONS... REGARDS AGENCY AS A TEMPORARY STOP UNTIL HE CAN GET SOMETHING BETTER.
- ☐ 3. TENDS TO HAVE AN UNFAVORABLE ATTITUDE TOWARD THE AGENCY... BOTHERED BY MINOR FRUSTRATIONS... WILL QUIT IF THESE CONTINUE.
- ☐ 4. HIS ATTITUDE TOWARD THE AGENCY IS INDIFFERENT... HAS "WAIT AND SEE" ATTITUDE... WOULD LEAVE IF SOMEONE OFFERED HIM SOMETHING BETTER.
- ☐ 5. TENDS TO HAVE FAVORABLE ATTITUDE TOWARD AGENCY... MAKES ALLOWANCES FOR RESTRICTIONS IMPOSED BY WORKING FOR AGENCY... THINKS IN TERMS OF A CAREER IN THE AGENCY.
- ☐ 6. DEFINITELY HAS FAVORABLE ATTITUDE TOWARD THE AGENCY... BARRING AN UNEXPECTED OUTSIDE OPPORTUNITY, WILL PROBABLY ENDEAVOR TO MAKE A CAREER IN THE AGENCY.
- ☒ 7. HAS AN ENTHUSIASTIC ATTITUDE TOWARD THE AGENCY... WILL PROBABLY NEVER CONSIDER WORKING ANY PLACE BUT IN THE AGENCY.

B. DIRECTIONS: Considering others of this person's grade and type of assignment, how would you rate him on potentiality for assumption of greater responsibilities normally indicated by promotion.

- ☐ 1. HAS REACHED THE HIGHEST GRADE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED.
- ☐ 2. IS MAKING PROGRESS, BUT NEEDS MORE TIME IN PRESENT GRADE BEFORE PROMOTION TO A HIGHER GRADE CAN BE RECOMMENDED.
- ☐ 3. IS READY TO TAKE ON RESPONSIBILITIES OF THE NEXT HIGHER GRADE, BUT MAY NEED TRAINING IN SOME AREAS.
- ☒ 4. WILL PROBABLY ADJUST QUICKLY TO THE MORE RESPONSIBLE DUTIES OF THE NEXT HIGHER GRADE.
- ☐ 5. IS ALREADY PERFORMING AT THE LEVEL OF THE NEXT HIGHER GRADE.
- ☐ 6. AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR RAPID ADVANCEMENT.

D. DIRECTIONS: Consider everything you know about this person in making your rating... skill in job duties, conduct on the job, personal characteristics or habits, and special defects or talents.

- ☐ 1. DEFINITELY UNSUITABLE - HE SHOULD BE SEPARATED.
- ☐ 2. OF DOUBTFUL SUITABILITY... WOULD NOT HAVE ACCEPTED HIM IF I HAD KNOWN WHAT I KNOW NOW.
- ☐ 3. A BARELY ACCEPTABLE EMPLOYEE... DEFINITELY BELOW AVERAGE BUT WITH NO WEAKNESSES SUFFICIENTLY OUTSTANDING TO WARRANT HIS SEPARATION.
- ☐ 4. A TYPICAL EMPLOYEE... HE DISPLAYS THE SAME SUITABILITY AS MOST OF THE PEOPLE I KNOW IN THE AGENCY.
- ☒ 5. A FINE EMPLOYEE - HAS SOME OUTSTANDING STRENGTHS.
- ☐ 6. AN UNUSUALLY STRONG PERSON IN TERMS OF THE REQUIREMENTS OF THE AGENCY.
- ☐ 7. EXCELLED BY ONLY A FEW IN SUITABILITY FOR WORK IN THE AGENCY.

**SECRET**

SECRET

CUMULATIVE TRAINING RECORD					DATE 10 February 1955
NAME O'D. ASTOR, Ann L.			PROJECTED PERSONNEL ACTION		
FROM: Area 4-8 Off 75-11 NA New Delhi			PROMOTION		
			REASSIGNMENT		
TO: Area 4-11, Off 05-11 NA Wash DC			OTHER (Explain)		
			ROTATION		
TRAVEL					
X	COURSE	DATE-TAKEN	X	OTHER TRAINING COURSES	DATE TAKEN
	BIC(CS), ALSO				
	BIC, BITC, SOC	49		050	17
	STP AND SOC				
	STP II, ALSO DC				
	STP III, ALSO				
	ATC, ATC, AOC	49	X	QBR	
	AND CAI				
	PO, ALSO PM 1.				
	II, III AND RAFT				
	ITC ALSO CI	46			
	TECH				
	ADMIN	51			
	SIC				
	SUP				
	CFA				
	RPTS				
	OB				
	OSC (CS)				
	E & E				
	CPW				
	WP SOC				
	CPO	51			
	STB				
	CEW				
	IT				
	GW				
	SAB				
	AO				
	MO				
	SUR				
	BFOT	46			
	DOC				
	LOCKS				
	S/M	51			
	F & S				
	SAF				
TO: Personnel Officer, V.G. JAR: A			FROM: Career Management Officer JAMES P. WILKINS		
The above projected personnel action has been <input type="checkbox"/> approved <input type="checkbox"/> disapproved by the Career Service Board. Additional training as indicated above has been recommended by the Training Officer to satisfy requirements of the proposed personnel action.					
Please schedule these courses as soon as possible through your Division Training Officer who will coordinate with the Senior Staff Training Officer.					
DATE 14 Feb 55			SIGNATURE OF CAREER MANAGEMENT OFFICER James P. Wilkins		

SECRET

CUMULATIVE TRAINING RECORD					DATE 10 Jan 54
NAME GOOD, Anne L.			PROJECTED PERSONNEL ACTION		
FROM: Anne Dns 088-4-21			PROMOTION		
			REASSIGNMENT		
TO: Anne Dns 088-4-21			TRAVEL		
			OTHER (Explain)		
AOS					
X	COURSE	DATE TAKEN	X	OTHER TRAINING COURSES	DATE TAKEN
	BICICS, ALSO BIC, BITC, SOC, BTP AND BOS	49		050	47
	BTP II, ALSO OC		X	Q5 Report	
	BTP III, ALSO AIC, AITC, AOC AND CAI	49			
	PO, ALSO PW I, II, III AND RAFT				
	ITC ALSO CI	51			
	TECH				
	ADMIN	51			
	SIC				
	SUP				
	CFA				
	RPTS				
	OB				
	OSC (CE)				
	E & R				
	CPW				
	WPSOC				
	CPO	51			
	STB				
	CEW				
	IT				
	GW				
	SAB				
	AO				
	MO				
	SUR				
	BFOT	46			
	DOC				
	LOCKS				
	S/W	51			
	F & S				
	SAF				
TO: Personnel Officer, F.C. JEROME			FROM: Career Management Officer James J. [Signature]		
The above projected personnel action has been <input checked="" type="checkbox"/> approved <input type="checkbox"/> disapproved by the Career Service Board. Additional training as indicated above has been recommended by the Training Officer to satisfy requirements of the proposed personnel action.					
Please schedule these courses as soon as possible through your Division Training Officer who will coordinate with the Senior Staff Training Officer.					
DATE 4 Jan '54			SIGNATURE OF CAREER MANAGEMENT OFFICER James J. [Signature]		

SECRET

(2-4-45)

SECRET

CUMULATIVE TRAINING RECORD						DATE
NAME						16 June 1951
PROJECTED PERSONNEL ACTION						
<input checked="" type="checkbox"/> PROMOTION <input type="checkbox"/> REASSIGNMENT <input type="checkbox"/> OTHER (Explain)						
<input checked="" type="checkbox"/> ROTATION <input type="checkbox"/> TRAVEL						
FROM: Miss Ann Goodnature			TO: AOS			
I.O. CS-9 WH/ Washington			I.O. Call MI/Washington			
X	COURSE	DATE TAKEN	X	OTHER TRAINING COURSES	DATE TAKEN	REMARKS
	BICIES, ALSO					1. CONSTRUCTIVE CREDIT (CC) HAS BEEN AUTHORIZED FOR COURSES SO MARKED BASED UPON SUBJECT'S PREVIOUS: <input type="checkbox"/> BACKGROUND <input type="checkbox"/> EXPERIENCE <input type="checkbox"/> TRAINING.
	BIC, BIC, SOC.					
	BTP AND SOC					2. SUBJECT HAS COMPLETED TRAINING OR RECEIVED CONSTRUCTIVE CREDIT AS SHOWN AT THE LEFT.
	BTP II, ALSO OC					
	BTP III, ALSO					STAFF TRAINING OFFICE COMMENTS:
	AIC, BIC, SOC					
	AND CBI					<input type="checkbox"/> A. THIS <input type="checkbox"/> DOES <input type="checkbox"/> DOES NOT MEET MINIMUM TRAINING STANDARDS RE QUALIFICATION FOR THE PROJECTED ACTION.
	PO, ALSO PW I.					
	II, III AND RAPT					<input type="checkbox"/> B. SUBJECT IS CURRENTLY ENROLLED IN COURSES MARKED WITH AN S, THE COMPLETION OF WHICH WILL SATISFY MINIMUM STANDARDS.
	ITC ALSO CI					
	TECH					<input type="checkbox"/> C. UNLESS SUBJECT HAS HAD PREVIOUS NO. OR FIELD EXPERIENCE, WHICH CAN BE ACCEPTED IN LIEU OF TRAINING, SUBJECT SHOULD BE REQUIRED TO TAKE <input type="checkbox"/> QUALIFYING <input type="checkbox"/> REFRESHER TRAINING AS CHECKED AT THE LEFT.
	ADMIN					
	SIC					
	SUP					
	CFA					
	RPTS					
	OS					
	OSC (CS)					
	E R E					
	CPW					
	WPSOC					
	CPO					
	STB					
	CEW					
	IT					
	GW					
	SAB					
	AO					
	MO					
	SUR					
	BFOT					
	DOC					
	LOCAS					
	S/O					
	F & S					
	SAF					
TO: Personnel Officer,						FROM: Career Management Officer
Virginia Lynch						James P. Humphries
The above projected personnel action has been <input type="checkbox"/> approved <input type="checkbox"/> disapproved by the Career Service Board. Additional training as indicated above has been recommended by the Training Officer to satisfy requirements of the proposed personnel action.						
Please schedule these courses as soon as possible through your Division Training Officer who will coordinate with the Senior Staff Training Officer.						
DATE						SIGNATURE OF CAREER MANAGEMENT OFFICER

SECRET

(2-6)

## STATUS AND EFFICIENCY REPORT

(SEE INSTRUCTIONS ON REVERSE SIDE)

SECTIONS 1 THROUGH 6 WILL BE COMPLETED BY EMPLOYEE. TYPEWRITER WILL BE USED IF POSSIBLE.

1. NAME: *Glenn L. Goodpasture* GRADE: *GS-9* SALARY: *\$5310.00* DATE OF ASSIGNMENT: *5 June 1951*

2. DESCRIPTION OF DUTIES SINCE LAST REPORT. (LIST MOST RECENT FIRST. DESCRIBE CONCISELY BUT FULLY)  
*No change*

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED.  
*None*

4. PROFICIENCY IN FOREIGN LANG. (TABLE)

5. MY PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS: (IF IN U.S. STATE) TYPE OF DUTY: *I.O.* LOCATION: *No preference*

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATER?  
MARITAL STATUS: *YES* NUMBER OF DEPENDENTS: *YES* EMERGENCY ADDRESSEE: *YES* LEGAL ADDRESS: *YES*  
IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO. IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

25 August 1953  
DATE

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR

7. PERIOD COVERED BY THIS REPORT: DATE FROM: *Feb 53* DATE TO: *Aug 53* OCCASION FOR REPORT: ANNUAL ☒ REASSIGNMENT OF REPORTING OFFICER ☐ PROPOSED REASSIGNMENT OF EMPLOYEE REPORTED ON ☐ COVERING INITIAL 90 DAYS OF EMPLOYMENT ☐

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES? ☒ YES ☐ NO IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES? ☒ YES ☐ NO *Intelligence Officer*

9. DO YOU CONCUR IN EMPLOYEE'S DESCRIPTION OF DUTIES UNDER SECTION 2? ☒ YES ☐ NO IF NO, EXPLAIN IN SECTION 11. HAS EMPLOYEE STRIVEN FOR PROFESSIONAL IMPROVEMENT? ☒ YES ☐ NO DO YOU RECOMMEND EMPLOYEE FOR PROMOTION? ☒ YES ☐ NO IF SO, TO WHAT GRADE AND FOR WHAT POSITION? *GS-11, Intelligence Officer*

10. FOR EACH FACTOR OBSERVED CHECK THE APPROPRIATE BOX TO INDICATE HOW THE EMPLOYEE COMPARES WITH ALL OTHERS OF THE SAME CLASSIFICATION WHOSE PROFESSIONAL ABILITIES ARE KNOWN TO YOU PERSONALLY. DO NOT LIMIT THIS COMPARISON TO THE OTHERS NOW UNDER YOUR SUPERVISION. DO NOT HESITATE TO MARK 'NOT OBSERVED' ON ANY QUALITY WHEN APPROPRIATE.

RATING FACTORS	NOT OBSERVED	UNSATISFACTORY	FAIR	GOOD	VERY GOOD	EXCELLENT	OUTSTANDING
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE						<input checked="" type="checkbox"/>	
B. INTEREST AND ENTHUSIASM IN WORK						<input checked="" type="checkbox"/>	
C. SECURITY CONSCIOUSNESS							<input checked="" type="checkbox"/>
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS						<input checked="" type="checkbox"/>	
E. ATTENTION TO DUTY						<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
F. JUDGMENT AND COMMON SENSE						<input checked="" type="checkbox"/>	
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE						<input checked="" type="checkbox"/>	
H. DISCRETION						<input checked="" type="checkbox"/>	
I. INITIATIVE						<input checked="" type="checkbox"/>	
J. ABILITY TO HANDLE AND DIRECT PEOPLE	<input checked="" type="checkbox"/>						
K. PERFORMANCE OF PRESENT DUTIES (ITEM 2)						<input checked="" type="checkbox"/>	
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION						<input checked="" type="checkbox"/>	
M. TACT						<input checked="" type="checkbox"/>	
N. SAGACITY (NON-GUILIBILITY)						<input checked="" type="checkbox"/>	
O. LEADERSHIP	<input checked="" type="checkbox"/>						
P. PHYSICAL STAMINA						<input checked="" type="checkbox"/>	
Q. MENTAL STAMINA						<input checked="" type="checkbox"/>	

11. ENTER HERE ANY DESIRED REMARKS PERTAINING TO PARTICULAR QUALIFICATIONS OR LACK THEREOF WHICH ARE CONSIDERED PERTINENT TO THE EVALUATION OF THIS EMPLOYEE. OUTSTANDING ASSETS AND/OR SERIOUS LIMITATIONS SHOULD BE STATED ALSO REASONS FOR AND RECOMMENDATIONS AS TO REASSIGNMENT WILL BE GIVEN IF APPROPRIATE TO THIS REPORT.

*This employee should be given duties of a responsible nature which will take advantage of his ability and wide experience with this organization. Such assignment with attendant promotion, is recommended.*

(IF ADDITIONAL SPACE IS NEEDED ATTACH EXTRA SHEETS)

1 September 1953  
DATE

(IF REVIEWING OFFICER OR CHIEF OF STATION DOES NOT CONCUR WITH THIS REPORT, EXCEPTIONS WILL BE STATED IN SPACE PROVIDED ON THE REVERSE SIDE HEREOF)

David B. Kewan  
SIGNATURE OF REPORTING OFFICERJ. C. King  
SIGNATURE OF REVIEWING OFFICER

UNDER NO CIRCUMSTANCES IS THIS REPORT TO BE

STATUS AND EFFICIENCY REPORT  
(SEE INSTRUCTIONS ON REVERSE SIDE)

SECTIONS 1 THROUGH 6 WILL BE COMPLETED BY EMPLOYEE.

TYPEWRITER WILL BE USED IF POSSIBLE.

1. NAME (Last, first, middle) CAF-S SALARY \$5310. DATE OF ASSIGNMENT TO PRESENT DUTY 8 June 1951

2. DESCRIPTION OF DUTY (LIST MOST RECENT FIRST. DESCRIBE CONCISELY BUT FULLY)  
No change. Administrative assistant, Substation, Monterrey, Mexico

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED.  
None

4. PROFICIENCY IN FOREIGN LANG. (List languages and proficiency in each)

LANG.	READING			SPEAKING			UNDERSTANDING		
	EXC	GOOD	FAIR	EXC	GOOD	FAIR	EXC	GOOD	FAIR
<u>None</u>									

5. MY PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS (IF IN US-50 STATE) TYPE AND DUTY LOCATION  
None

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATER?

MARITAL STATUS ☒ YES ☐ NO NUMBER OF DEPENDENTS ☒ YES ☐ NO EMERGENCY ADDRESSEE ☒ YES ☐ NO LEGAL ADDRESS ☒ YES ☐ NO

IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO, IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

18 March 1953  
DATE

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR.

7. PERIOD COVERED BY THIS REPORT DATE FROM 1 July, 52 DATE TO 28 Feb, 53

OCCASION FOR REPORT: ☐ ANNUAL ☐ REASSIGNMENT OF REPORTING OFFICER ☒ PROPOSED REASSIGNMENT OF EMPLOYEE REPORTED ON ☐ COVERING INITIAL 90 DAYS OF EMPLOYMENT

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES? ☒ YES ☐ NO IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES? ☐ YES ☒ NO IF SO, WHAT DUTY OR DUTIES Intelligence officer

9. DO YOU CONCUR IN EMPLOYEE'S DESCRIPTION OF DUTIES UNDER SECTION 2? ☒ YES ☐ NO IF NO, EXPLAIN IN SECTION 11

HAS EMPLOYEE STRIVEN FOR PROFESSIONAL IMPROVEMENT? ☒ YES ☐ NO IF YES, DO YOU RECOMMEND EMPLOYEE FOR PROMOTION? ☒ YES ☐ NO IF YES, TO WHAT GRADE AND FOR WHAT POSITION? Intelligence officer

10. FOR EACH FACTOR OBSERVED CHECK THE APPROPRIATE BOX TO INDICATE HOW THE EMPLOYEE COMPARES WITH ALL OTHERS OF THE SAME CLASSIFICATION WHOSE PROFESSIONAL ABILITIES ARE KNOWN TO YOU PERSONALLY. DO NOT LIMIT THIS COMPARISON TO THE OTHERS NOW UNDER YOUR SUPERVISION. DO NOT HESITATE TO MARK "NOT OBSERVED" ON ANY QUALITY WHEN APPROPRIATE.

RATING FACTORS	NOT OBSERVED	UNSATISFACTORY	FAIR	GOOD	VERY GOOD	EXCELLENT	OUTSTANDING
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE						<input checked="" type="checkbox"/>	
B. INTEREST AND ENTHUSIASM IN WORK						<input checked="" type="checkbox"/>	
C. SECURITY CONSCIOUSNESS						<input checked="" type="checkbox"/>	
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS						<input checked="" type="checkbox"/>	
E. ATTENTION TO DUTY						<input checked="" type="checkbox"/>	
F. JUDGMENT AND COMMON SENSE					<input checked="" type="checkbox"/>		
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE					<input checked="" type="checkbox"/>		
H. DISCRETION						<input checked="" type="checkbox"/>	
I. INITIATIVE						<input checked="" type="checkbox"/>	
J. ABILITY TO HANDLE AND DIRECT PEOPLE	<input checked="" type="checkbox"/>						
K. PERFORMANCE OF PRESENT DUTIES (ITEM 2)						<input checked="" type="checkbox"/>	
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION					<input checked="" type="checkbox"/>		
M. TACT					<input checked="" type="checkbox"/>		
N. SAGACITY (NON-GULLIBILITY)						<input checked="" type="checkbox"/>	
O. LEADERSHIP	<input checked="" type="checkbox"/>						
P. PHYSICAL STAMINA	<input checked="" type="checkbox"/>						
Q. MENTAL STAMINA						<input checked="" type="checkbox"/>	

10. INDICATE YOUR ATTITUDE TOWARD HAVING THIS EMPLOYEE UNDER YOUR COMMAND OR SUPERVISION. WOULD YOU DEFINITELY NOT WANT HIM? ☐ PREFER NOT TO HAVE HIM? ☐ BE SATISFIED TO HAVE HIM? ☐ BE PLEASED TO HAVE HIM? ☒ PARTICULARLY DESIRE HIM? ☒

11. ENTER HERE ANY DESIRED REMARKS PERTAINING TO PARTICULAR QUALIFICATIONS OR LACK THEREOF - WHICH ARE CONSIDERED PERTINENT TO THE EVALUATION OF THIS EMPLOYEE. OUTSTANDING ASSETS AND/OR SERIOUS LIMITATIONS SHOULD BE STATED ALSO REASONS FOR AND RECOMMENDATIONS AS TO REASSIGNMENT WILL BE GIVEN IF APPROPRIATE TO THIS REPORT.

Note: This report is occasioned by the resignation of the Chief of Mission, Mexico City, under whose supervision the Substation, Monterrey operates. He suggested that the undersigned submit this report as being more familiar with Riggs' work than he is.

18 March 1953  
DATE

David B. Kewan  
SIGNATURE OF REPORTING OFFICER

(IF REVIEWING OFFICER OR CHIEF OF STATION DOES NOT CONCUR WITH THIS REPORT, EXCEPTIONS WILL BE STATED IN SPACE PROVIDED ON THE REVERSE SIDE HEREOF)

SIGNATURE OF REVIEWING OFFICER

# STATUS AND EFFICIENCY REPORT

(SEE INSTRUCTIONS ON REVERSE SIDE)

SECTIONS 1 THROUGH 6 WILL BE COMPLETED BY EMPLOYEE. TYPEWRITER WILL BE USED IF POSSIBLE.

1. NAME (PRINTED) LAST FIRST MIDDLE CAP RATING SALARY DATE OF ASSIGNMENT  
[REDACTED] GS-9 \$5185.00 8 June 1951

2. DESCRIPTION OF DUTIES SINCE LAST EFFICIENCY REPORT. (LIST MOST RECENT FIRST. DESCRIBE CONCISELY BUT FULLY)  
Administrative Assistant, Monterrey, Mexico. Under general supervision of the Chief of Substation is responsible for all administrative reports, maintenance of files, communications duties, custodian of property, preparation of pouches and performance of such other duties as may be assigned.

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED. None

4. PROFICIENCY IN FOREIGN LANG. (TABLE)

LANG.	READING		SPEAKING		UNDERSTANDING	
	EXC.	GOOD	EXC.	GOOD	EXC.	GOOD
French		X				
Spanish		X				

5. MY PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS: (IF IN US-50 STATE)  
TYPE OF DUTY LOCATION  
Reports Officer Headquarters  
Operations Officer Headquarters  
(LIST ONE OR MORE IN ORDER OF PREFERENCE)

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATEST?  
MARITAL STATUS YES NUMBER OF DEPENDENTS YES EMERGENCY ADDRESSEE YES LEGAL ADDRESS YES  
X NO X NO X NO X NO  
IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO. IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

1 June 1952

DATE

*Goodpastor, Ann Loren*

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR

7. PERIOD COVERED BY THIS REPORT DATE FROM DATE TO OCCASION FOR REPORT  
1 Oct. 1951 1 June 1952 ANNUAL ☒ REASSIGNMENT OF REPORTING OFFICER ☐ PROPOSED REASSIGNMENT OF EMPLOYEE REPORTED ON ☐ COVERING INITIAL 90 DAYS OF EMPLOYMENT ☐

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES? ☒ YES ☐ NO IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES? ☒ YES ☐ NO IF SO, WHAT DUTY OR DUTIES *REPORTS AND/OR OPERATIONS OFFICER*

DO YOU CONCUR IN EMPLOYEE'S DESCRIPTION OF DUTIES UNDER SECTION 2? ☒ YES ☐ NO IF NO, EXPLAIN IN SECTION 11  
HAS EMPLOYEE STRIVEN FOR PROFESSIONAL IMPROVEMENT? ☒ YES ☐ NO DO YOU RECOMMEND EMPLOYEE FOR PROMOTION? ☒ YES ☐ NO IF SO, TO WHAT GRADE AND FOR WHAT POSITION? *GS-11, OPERATIONS OFFICER*

9. FOR EACH FACTOR OBSERVED CHECK THE APPROPRIATE BOX TO INDICATE HOW THE EMPLOYEE COMPARES WITH ALL OTHERS OF THE SAME CLASSIFICATION WHOSE PROFESSIONAL ABILITIES ARE KNOWN TO YOU PERSONALLY. DO NOT LIMIT THIS COMPARISON TO THE OTHERS NOW UNDER YOUR SUPERVISION. DO NOT HESITATE TO MARK "NOT OBSERVED" ON ANY QUALITY WHEN APPROPRIATE.

RATING FACTORS	NOT OBSERVED	UNSATISFACTORY	FAIR	GOOD	VERY GOOD	EXCELLENT	OUTSTANDING
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE						<input checked="" type="checkbox"/>	
B. INTEREST AND ENTHUSIASM IN WORK						<input checked="" type="checkbox"/>	
C. SECURITY CONSCIOUSNESS						<input checked="" type="checkbox"/>	
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS						<input checked="" type="checkbox"/>	
E. ATTENTION TO DUTY						<input checked="" type="checkbox"/>	
F. JUDGMENT AND COMMON SENSE						<input checked="" type="checkbox"/>	
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE						<input checked="" type="checkbox"/>	
H. DISCRETION						<input checked="" type="checkbox"/>	
I. INITIATIVE						<input checked="" type="checkbox"/>	
J. ABILITY TO HANDLE AND DIRECT PEOPLE	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	
K. PERFORMANCE OF PRESENT DUTIES (ITEM 2)						<input checked="" type="checkbox"/>	
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION						<input checked="" type="checkbox"/>	
M. TACT						<input checked="" type="checkbox"/>	
N. SAGACITY (NON-GULLIBILITY)						<input checked="" type="checkbox"/>	
O. LEADERSHIP	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	
P. PHYSICAL STAMINA						<input checked="" type="checkbox"/>	
Q. MENTAL STAMINA							<input checked="" type="checkbox"/>

10. INDICATE YOUR ATTITUDE TOWARD HAVING THIS EMPLOYEE UNDER YOUR COMMAND OR SUPERVISION. WOULD YOU DEFINITELY ☐ PREFER NOT ☐ BE SATISFIED ☐ BE PLEASED ☒ PARTICULARLY ☐  
NOT WANT HIM? TO HAVE HIM? TO HAVE HIM? TO HAVE HIM? DESIRE HIM?

11. ENTER HERE ANY DESIRED REMARKS PERTAINING TO PARTICULAR QUALIFICATIONS OR LACK THEREOF WHICH ARE CONSIDERED PERTINENT TO THE EVALUATION OF THIS EMPLOYEE. OUTSTANDING ASSETS AND/OR SERIOUS LIMITATIONS SHOULD BE STATED ALSO REMARKS FOR AND RECOMMENDATIONS AS TO REASSIGNMENT WILL BE GIVEN IF APPROPRIATE TO THIS REPORT.  
*Qualifications, experience & general ability have been invaluable in the activation of this small substation.*

(IF ADDITIONAL SPACE IS NEEDED ATTACH EXTRA SHEET)

1 June 1952

DATE

*David B. Kenan*

SIGNATURE OF REPORTING OFFICER

(IF REVIEWING OFFICER OR CHIEF OF STATION DOES NOT CONCUR WITH THIS REPORT, EXCEPTIONS WILL BE STATED IN SPACE PROVIDED ON THE REVERSE SIDE HEREOF)

*John P. [Signature]*

SIGNATURE OF REVIEWING OFFICER

UNDER NO CIRCUMSTANCES IS THIS REPORT TO BE SHOWN TO THE EMPLOYEE REPORTED ON

CONFIDENTIAL

*W. H. Galt III*



1. NAME (PRINTED) LAST FIRST MIDDLE  
RINGS, Robert H.

CAF RATING CAF-9

SALARY \$4600.00

DATE OF ASSIGNMENT June 8, 1951

2. DESCRIPTION OF DUTIES SINCE LAST EFFICIENCY REPORT. (LIST MOST RECENT FIRST; DESCRIBE CONCISELY BUT FULLY)  
Intelligence Assistant, Monterrey Substation, Monterrey, NL, Mexico

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED.  
None

4. PROFICIENCY IN FOREIGN LANGS.

PERIOD LANG.	READING			SPEAKING			UNDERSTANDING		
	ANC	MOD	FAIR	SEC	GOOD	FAIR	SEC	GOOD	FAIR
French		X				X			X

5. MY PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS: (IF IN US, TO STATE) LOCATION  
No preference at this time other than present assignment and present location.

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATEST?

MARITAL STATUS ☒ YES ☒ NO NUMBER OF DEPENDENTS ☒ YES ☒ NO EMERGENCY ADDRESSEE ☒ YES ☒ NO LEGAL ADDRESS ☒ YES ☒ NO

IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO. IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

17 October 1951

DATE

Robert B. Rings

SIGNATURE OF EMPLOYEE

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR

7. PERIOD COVERED BY THIS REPORT  
DATE FROM 9 July 51 DATE TO 9 Oct 51

OCCASION FOR REPORT  
ANNUAL ☐ REASSIGNMENT OF REPORTING OFFICER ☐ PROPOSED REASSIGNMENT OF EMPLOYEE REPORTED ON ☐ COVERING INITIAL 90 DAYS OF EMPLOYMENT ☒ at station

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES? ☒ YES ☐ NO IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES? ☒ YES ☐ NO IF SO, WHAT DUTY OR DUTIES  
INTELLIGENCE OFFICER

DO YOU CONCUR IN EMPLOYEE'S DESCRIPTION OF DUTIES UNDER SECTION 2? ☒ YES ☐ NO IF NO, EXPLAIN IN SECTION 11  
HAS EMPLOYEE STRIVEN FOR PROFESSIONAL IMPROVEMENT? ☒ YES ☐ NO DO YOU RECOMMEND EMPLOYEE FOR PROMOTION? ☒ YES ☐ NO IF SO, TO WHAT GRADE AND FOR WHAT POSITION?  
GS-10, INTELLIGENCE OFFICER

9. FOR EACH FACTOR OBSERVED CHECK THE APPROPRIATE BOX TO INDICATE HOW THE EMPLOYEE COMPARES WITH ALL OTHERS OF THE SAME CLASSIFICATION WHOSE PROFESSIONAL ABILITIES ARE KNOWN TO YOU PERSONALLY. DO NOT LIMIT THIS COMPARISON TO THE OTHERS NOW UNDER YOUR SUPERVISION. DO NOT HESITATE TO MARK "NOT OBSERVED" ON ANY QUALITY WHEN APPROPRIATE.

RATING FACTORS	NOT OBSERVED	UNSATISFACTORY	FAIR	GOOD	VERY GOOD	EXCELLENT	OUTSTANDING
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE						<input checked="" type="checkbox"/>	
B. INTEREST AND ENTHUSIASM IN WORK							<input checked="" type="checkbox"/>
C. SECURITY CONSCIOUSNESS							<input checked="" type="checkbox"/>
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS							<input checked="" type="checkbox"/>
E. ATTENTION TO DUTY						<input checked="" type="checkbox"/>	
F. JUDGMENT AND COMMON SENSE						<input checked="" type="checkbox"/>	
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE						<input checked="" type="checkbox"/>	
H. DISCRETION							<input checked="" type="checkbox"/>
I. INITIATIVE						<input checked="" type="checkbox"/>	
J. ABILITY TO HANDLE AND DIRECT PEOPLE		<input checked="" type="checkbox"/>					
K. PERFORMANCE ON PRESENT DUTIES (ITEM 2)						<input checked="" type="checkbox"/>	
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION		<input checked="" type="checkbox"/>					
M. TACT						<input checked="" type="checkbox"/>	
N. SAGACITY (COMMON SENSE)						<input checked="" type="checkbox"/>	
O. LEADERSHIP		<input checked="" type="checkbox"/>					
P. PHYSICAL STAMINA						<input checked="" type="checkbox"/>	
Q. MENTAL STAMINA						<input checked="" type="checkbox"/>	

10. INDICATE YOUR ATTITUDE TOWARD HAVING THIS EMPLOYEE UNDER YOUR COMMAND OR SUPERVISION. WOULD YOU DEFINITELY PREFER NOT TO HAVE HIM? ☐ BE SATISFIED BE PLEASED PARTICULARLY NOT WANT HIM? ☐ TO HAVE HIM? ☐ TO HAVE HIM? ☐ TO HAVE HIM? ☒ DESIRE HIM?
11. ENTER HERE ANY DESIRED REMARKS PERTAINING TO PARTICULAR QUALIFICATIONS OR LACK THEREOF WHICH ARE CONSIDERED PERTINENT TO THE EVALUATION OF THIS EMPLOYEE. OUTSTANDING ASSETS AND/OR SERIOUS LIMITATIONS SHOULD BE STATED ALSO REASONS FOR AND RECOMMENDATIONS AS TO REASSIGNMENT WILL BE GIVEN IF APPROPRIATE TO THIS REPORT.

Rings, experience and general ability have been instrumental in organizing new stations. He has willingly assumed increasing duties and administrative functions, leaving the undersigned free for development of new business.

(IF ADDITIONAL SPACE IS NEEDED ATTACH EXTRA SHEET)

17 October 1951

(IF REVIEWING OFFICER OR CHIEF OF STATION DOES NOT CONCUR WITH THIS REPORT, EXCEPTIONS WILL BE STATED IN SPACE PROVIDED ON THE REVERSE SIDE HEREOF)

George M. Vignati  
Chief of Station

SIGNATURE OF REVIEWING OFFICER

UNDER NO CIRCUMSTANCES IS THIS REPORT TO BE SHOWN TO THE EMPLOYEE REPORTED ON



*conf. packet*  
**SECRET**

JUN 13 1951

TO : Chief, FDT  
 FROM : Chief, Investigative Techniques Section, TRD  
 SUBJECT: Counterintelligence Techniques Course

1. Ann Goodpasture was enrolled in the counter-intelligence techniques course for the period 29 May through 5 June 1951. He received instruction in the following elements:

- |   |             |
|---|-------------|
| a. Familiarization with the techniques of long range photography (taking of telephoto pictures) | <u>X</u>    |
| b. Instruction in methods of intensifying and reducing of negatives                             | <u>X</u>    |
| c. Field expedient for the taking of extremely long range pictures                              | <u>X</u>    |
| d. Simple technique for producing small images of documents for concealment purposes            | <u>X</u>    |
| e. Work with the Speed Graphic camera and accessories   | <u>X</u>    |
| f. Practice in the taking of photo-flash pictures   | <u>X</u>    |
| g. Work with the Photo-Record and Recordak cameras  | <u>X</u>    |
| h. Continued practice in darkroom techniques  | <u>X</u>    |
| i. Locking devices; their relative security, methods of picking safes and combination locks     | <u>X</u>    |
| j. Instruction and demonstration of microphones and wire-tapping and recording equipment        | <u>    </u> |
| k. Surreptitious entry methods, opening of sealed documents                                     | <u>    </u> |
| l. Fingerprints, possibilities, limitations, and laboratory practice                            | <u>    </u> |
| m. Scientific aids, identification of tool marks, string, paper, etc.                           | <u>    </u> |

2. This student completed all phases of the training in a satisfactory manner.

3. Additional comments: Miss Goodpasture had to leave the course before the end of the second week.

**SECRET**

*R. L. McLEERO*  
 R. L. McLEERO

2  
CONFIDENTIAL

TO : Chief, FDT

29 May 1951

FROM : Chief, Investigative Techniques Section, TRD

SUBJECT: Basic Photographic Course (Second Week)

1. Miss Ann Goodpasture was enrolled  
in the Basic Photographic Course (second week) for the period 21 May  
through 23 May 1951

2. This course provides intensive practice in all the techniques covered in the first week Basic Photographic Course. The student works under a minimum of supervision and field conditions are simulated as nearly as possible.

3. Other photographic techniques in which this student received training:

4. This student completed all phases of this course in a satisfactory manner.

Although Miss Goodpasture was present for only three days of the second week's course she appeared to have a working knowledge of the work covered.

R. L. Melberg  
R. L. MELBERG

CONFIDENTIAL

SECRET

Date: 29 May 1951

MEMORANDUM

TO : Chief, Foreign Division T  
FROM : Chief, Communications Division  
SUBJECT: Completion of Communications Training

1. Ann L. Goodpasture has satisfactorily completed the cryptographic and communications security Briefing Course which was given for a specific assignment at Monterrey, Mexico.
2. Student listed above is ~~is~~ qualified to perform cryptographic duties.  
(Comments: Has previous experience. Is capable of performing communications duties with limited supervision or the use of reference materials.)
3. Prior to departure for the field, the above-named person should report to Communications Security Branch, Communications Division, for final briefing. This briefing will require approximately two hours, and must be scheduled in advance at least one week before departure. Appointments can be made by contacting the Communications Security Branch. If training was given outside CIA headquarters, arrangements should be made for a final briefing on the outside.
4. If departure has not occurred within two months after completion of the course, student will be required to return to Training branch, Communications Division, as soon as possible for a review. This review will require approximately 8 hours, and will be repeated at the end of each two-month delay. (The foreign division will be notified when a two-month period has elapsed and arrangements for the review will be made.)
5. It is requested that this office be notified at once, in writing, of any changes in assignment. The training given was specific for the assignment indicated in Paragraph 1 and additional training may be required if the assignment is changed.
6. If the assignment is cancelled, it is requested that this office be notified at once, in writing, and that the student report to Communications Security Branch as soon as possible for a communications debriefing.

FOR THE CHIEF, COMMUNICATIONS DIVISION

*Joseph J. Canella*  
JOSEPH J. CANELLA  
Chief, Communications Training Branch

CC: CSB  
EXR  
EXR

SECRET

CONFIDENTIAL

Chief, FDT

23 May 1951

1. Assignive to Detective Section, FDT

2. Assignive to Detective Section, FDT

3. Miss Ann Goodpasture

14 May

17 May

in compliance with the following

1. X
2. X
3. X
4. X
5. X
6. X
7. X
8. X
9. X
10. X
11. X
12. X
13. X
14. X
15. X
16. X
17. X
18. X
19. X
20. X
21. X
22. X
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90. X
91. X
92. X
93. X
94. X
95. X
96. X
97. X
98. X
99. X
100. X

7. Other photographic techniques in which this can be completed

8. This student completed all phases of this course in satisfactory manner.

9. Although Miss Goodpasture was out for a day and 1/2 on sick leave she has a working knowledge of the material covered during her absence.

CONFIDENTIAL

R. L. MELBERG

## SECRET

## TRAINING EVALUATION

1. The official to whom this report is entrusted is personally responsible for it. Although he may, within his discretion show it to other members of his staff, the report should never be shown to the student whom it concerns.

2. The report summarizes the findings, observations, and opinions of the various instructors during the course listed only, with no reference to other facts or findings about the student. More complete data is available in the files of the Training Division and may be examined after contacting the Records and Scheduling Officer.

STUDENT'S NAME GOODPASTURE, AnnDATE OF REPORT 1 May 1951TRAINING COURSE Administration Course #22DIVISION FDT/OSOGRADE GS-9TRAINING PERIOD 16 - 28 April 1951PROJECTED ASSIGNMENT Admin. Ass't - Monterrey, Mexico

1. PERFORMANCE RECORD: The following grades show the achievement of the student in class problems and examinations. The total possible score is broken down to indicate the relative weighting of various factors. The overall adjectival rating is based on the following scales: 0 to 59% unsatisfactory; 60 to 79% Satisfactory; 80 to 89% Excellent; 90 to 100% Superior.

Possible ScoreAchieved Score

Headquarters and Field Problem  
General Exam

100  
100

86  
89

175

Overall Adjectival Rating - Excellent - 87

2. TRAIT CHARACTERISTICS RECORD. The following indicates the various personality traits as observed by the instructors during the training period. The observations include the student's participation and conduct in training as well as his reactions to various problems and situations. A scale of 0 to 10 is used, 0 indicating that the trait has not been observed, the lower numbers indicating below average, the higher indicating above average.

	<u>Rating</u>
(1) Ability to get along and work with people . . . . .	
(2) Ability to grasp instructions . . . . .	
(3) Enthusiasm and interest in work . . . . .	
(4) Industriousness . . . . .	
(5) Practical intelligence . . . . .	
(6) Astuteness . . . . .	
(7) Adaptability . . . . .	
(8) Effectiveness . . . . .	
(9) Stability . . . . .	
(10) Initiative . . . . .	
(11) Imagination . . . . .	
(12) Ability to handle and direct people . . . . .	

See Comment

3. COMMENT. (To be used only in cases of outstanding strengths and weaknesses.) This employee who has been with the Agency since 1944 and has had both Headquarters and Field experience exhibited outstanding cooperation, understanding and adaptability of the highest degree throughout the entire course.

*William S. Renahan*  
CHIEF INSTRUCTOR  
WILLIAM S. RENEHAN

APPROVED.

*L. B. Shallcross*  
L. B. SHALLCROSS

REVIEWED.

*Pringle*  
PRINGLE

VOUCHERED

Form approved  
Budget Bureau No. 50-R0122

## REPORT OF EFFICIENCY RATING

ADMINISTRATIVE-UNOFFICIAL ( )  
OFFICIAL  
REGULAR (X) SPECIAL ( )  
PROBATIONAL ( )

As of 31 March 1950 based on performance during period from 21 Sept. '49 to 31 March 1950

GOODPASTURE, Ann L.  
(Name of employee)

Intelligence Officer GS-7  
(Title of position, service, and grade)

OSO, FDZ, Div. I

(Organization - indicate bureau, division, section, unit, field station)

ON LINES BELOW MARK EMPLOYEE	1. Study the instructions in the Rating Official's Guide, C. S. C. Form No. 3823A. 2. Underline the elements which are especially important in the position. 3. Rate only on elements pertinent to the position. a. Do not rate on elements in <i>italics</i> except for employees in administrative, supervisory, or planning positions. b. Rate administrative, supervisory, and planning functions on elements in <i>italics</i> .	CHECK ONE: Administrative, supervisory, or planning <input checked="" type="checkbox"/> All others <input type="checkbox"/>
<input checked="" type="checkbox"/> If adequate		
<input type="checkbox"/> If weak		
<input type="checkbox"/> If outstanding		

- |  |  |
|--|--|
| <input type="checkbox"/> (1) Maintenance of equipment, tools, instruments.   | <input type="checkbox"/> (21) Effectiveness in planning broad programs.  |
| <input type="checkbox"/> (2) Mechanical skill.   | <input type="checkbox"/> (22) Effectiveness in adapting the work program to broader or related programs.                   |
| <input type="checkbox"/> (3) Skill in the application of techniques and procedures.  | <input type="checkbox"/> (23) Effectiveness in devising procedures.  |
| <input type="checkbox"/> (4) Presentability of work (appropriateness of arrangement and appearance of work).                                   | <input type="checkbox"/> (24) Effectiveness in laying out work and establishing standards of performance for subordinates. |
| <input checked="" type="checkbox"/> (5) Attention to broad phases of assignments.  | <input type="checkbox"/> (25) Effectiveness in directing, reviewing, and checking the work of subordinates.                |
| <input type="checkbox"/> (6) Attention to pertinent detail.  | <input type="checkbox"/> (26) Effectiveness in instructing, training, and developing subordinates in the work.             |
| <input type="checkbox"/> (7) Accuracy of operations.   | <input type="checkbox"/> (27) Effectiveness in promoting high working morale.  |
| <input type="checkbox"/> (8) Accuracy of final results.  | <input type="checkbox"/> (28) Effectiveness in determining space, personnel, and equipment needs.                          |
| <input checked="" type="checkbox"/> (9) Accuracy of judgments or decisions.  | <input type="checkbox"/> (29) Effectiveness in setting and obtaining adherence to time limits and deadlines.               |
| <input checked="" type="checkbox"/> (10) Effectiveness in presenting ideas or facts.   | <input type="checkbox"/> (30) Ability to make decisions.   |
| <input type="checkbox"/> (11) Industry.  | <input type="checkbox"/> (31) Effectiveness in delegating clearly defined authority to act.                                |
| <input type="checkbox"/> (12) Rate of progress on or completion of assignments.  |  |
| <input type="checkbox"/> (13) Amount of acceptable work produced. (Is mark based on production records? <input type="checkbox"/> ) (Yes or no) |  |
| <input checked="" type="checkbox"/> (14) Ability to organize his work.   |  |
| <input checked="" type="checkbox"/> (15) Effectiveness in meeting and dealing with others.   |  |
| <input checked="" type="checkbox"/> (16) Cooperativeness.  |  |
| <input checked="" type="checkbox"/> (17) Initiative.   |  |
| <input type="checkbox"/> (18) Resourcefulness.   |  |
| <input checked="" type="checkbox"/> (19) Dependability.  |  |
| <input type="checkbox"/> (20) Physical fitness for the work.   |  |

STATE ANY OTHER ELEMENTS CONSIDERED

- ☒ (A) Security
- ☐ (B) \_\_\_\_\_
- ☐ (C) \_\_\_\_\_

STANDARD Deviations must be explained on reverse side of this form		Adjective Rating
Plus marks on all underlined elements, and check marks or better on all other elements rated.	Excellent	Rating official.. <u>Excellent</u>
Check marks or better on all elements rated, and plus marks on at least half of the underlined elements.	Very Good	
Check marks or better on a majority of underlined elements, and all weak performance overcompensated by outstanding performance.	Good	Reviewing official.. <u>Excellent</u>
Check marks or better on a majority of underlined elements, and all weak performance not overcompensated by outstanding performance.	Fair	
Minus marks on at least half of the underlined elements.	Unsatisfactory	

Rated by Ch. H. Burchard Chief, Br. I, FLE/SEA 4 April 1950  
(Signature) (Title) (Date)

Reviewed by Harry W. Lane Deputy Chief, FDZ 12 April 50  
(Signature) (Title) (Date)

Rating approved by efficiency rating committee 8 June 50 Report to employee 8 June 50  
(Signature) (Date) (Date)

ERO-OSO-Dms 28 May 50

# REPORT OF EFFICIENCY RATING

ADMINISTRATIVE-UNOFFICIAL ( )  
OFFICIAL:  
REGULAR (X) SPECIAL ( )  
PROBATIONAL ( )

As of 9/21/49 based on performance during period from 3/21/49 to 9/21/49

Ann L. Goodpastor  
(Name of employee)

Intelligence Officer F-2 (Reports)  
(Title of position, service, and grade)

OSD, COPS

(Organization—Indicate bureau, division, section, unit, field station)

ON LINES BELOW MARK EMPLOYEE	1. Study the instructions in the Rating Official's Guide, C. S. C. Form No. 553A. 2. Underline the elements which are especially important in the position. 3. Rate only on elements pertinent to the position: a. Do not rate on elements in <i>italics</i> except for employees in administrative, supervisory, or planning positions. b. Rate administrative, supervisory, and planning functions on elements in <i>italics</i> .	CHECK ONE: Administrative, supervisory, or planning <input checked="" type="checkbox"/> All others <input type="checkbox"/>
<input checked="" type="checkbox"/> If adequate <input type="checkbox"/> If weak <input checked="" type="checkbox"/> If outstanding		

- \_\_\_\_ (1) Maintenance of equipment, tools, instruments.
- \_\_\_\_ (2) Mechanical skill.
- \_\_\_\_ (3) Skill in the application of techniques and procedures.
- \_\_\_\_ (4) Presentability of work (appropriateness of arrangement and appearance of work).
- \_\_\_\_ (5) Attention to broad phases of assignments.
- ☒ (6) Attention to pertinent detail.
- \_\_\_\_ (7) Accuracy of operations.
- ☒ (8) Accuracy of final results.
- ☒ (9) Accuracy of judgments or decisions.
- ☒ (10) Effectiveness in presenting ideas or facts.
- ☒ (11) Industry.
- \_\_\_\_ (12) Rate of progress on or completion of assignments.
- \_\_\_\_ (13) Amount of acceptable work produced. (Is mark based on production records? (Yes or no) )
- ☒ (14) Ability to organize his work.
- ☒ (15) Effectiveness in meeting and dealing with others.
- ☒ (16) Cooperativeness.
- ☒ (17) Initiative.
- ☒ (18) Resourcefulness.
- ☒ (19) Dependability.
- \_\_\_\_ (20) Physical fitness for the work.

- \_\_\_\_ (21) Effectiveness in planning broad programs.
- ☒ (22) Effectiveness in adapting the work program to broader or related programs.
- \_\_\_\_ (23) Effectiveness in devising procedures.
- \_\_\_\_ (24) Effectiveness in laying out work and establishing standards of performance for subordinates.
- \_\_\_\_ (25) Effectiveness in directing, reviewing, and checking the work of subordinates.
- \_\_\_\_ (26) Effectiveness in instructing, training, and developing subordinates in the work.
- \_\_\_\_ (27) Effectiveness in promoting high working morale.
- \_\_\_\_ (28) Effectiveness in determining space, personnel, and equipment needs.
- \_\_\_\_ (29) Effectiveness in setting and obtaining adherence to time limits and deadlines.
- \_\_\_\_ (30) Ability to make decisions.
- \_\_\_\_ (31) Effectiveness in delegating clearly defined authority to act.

## STATE ANY OTHER ELEMENTS CONSIDERED

- ☒ (A) Sense of security
- ☒ (B) Skill in English usage
- \_\_\_\_ (C)

STANDARD Deviations must be explained on reverse side of this form		Adjective Rating
Plus marks on all underlined elements, and check marks or better on all other elements rated.	Excellent	Rating official <u>EX</u>
Check marks or better on all elements rated, and plus marks on at least half of the underlined elements.	Very Good	Reviewing official <u>EX</u>
Check marks or better on a majority of underlined elements, and all weak performance overcompensated by outstanding performance.	Good	
Check marks or better on a majority of underlined elements, and all weak performance not overcompensated by outstanding performance.	Fair	
Minus marks on at least half of the underlined elements.	Unsatisfactory	

Rated by Byron C. Davis Chief, R. I. PDZ/SEA 11 October 1949  
(Signature of rating official) (Title) (Date)  
Reviewed by George H. Davis Chief, PDZ 21 Oct 49  
(Signature of reviewing official) (Title) (Date)  
Rating approved by efficiency rating committee 20-44 Report to employee 20-44  
(Date) (Adjective rating)

CONFIDENTIAL

STATUS AND EFFICIENCY REPORT

(SEE INSTRUCTIONS ON REVERSE SIDE)

*Ann G. [unclear]*

SECTIONS 1 THROUGH 6 WILL BE COMPLETED BY EMPLOYEE.

TYPEWRITER WILL BE USED IF POSSIBLE.

1. NAME (PRINTED) LAST FIRST MIDDLE CAP RATING SALARY DATE OF ASSIGNMENT  
**RIGGS Robert B. 9 \$4,149.60 17 April 47**

2. DESCRIPTION OF DUTIES SINCE LAST EFFICIENCY REPORT. (LIST MOST RECENT FIRST. DESCRIBE CONCISELY BUT FULLY)  
**No change since last efficiency report**

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED.  
**None**

4. PROFICIENCY IN FOREIGN LANG.	READING			SPEAKING			UNDERSTANDING		
	EXC	GOOD	FAIR	EXC	GOOD	FAIR	EXC	GOOD	FAIR
<b>No Change</b>									

5. PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS (IF IN US-30 STATE)  
**No preference**

(LIST ONE OR MORE IN ORDER OF PREFERENCE)

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATER? **None**

MARITAL STATUS ☒ YES ☒ NO NUMBER OF DEPENDENTS ☒ YES ☒ NO EMERGENCY ADDRESSEE ☒ YES ☒ NO LEGAL ADDRESS ☒ YES ☒ NO

IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO. IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

**1 June 1948**

DATE

*Robert B. Riggs*  
 SIGNATURE OF EMPLOYEE

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR

7. PERIOD COVERED BY THIS REPORT DATE FROM DATE TO OCCASION FOR REPORT ANNUAL ☐ REASSIGNMENT OF REPORTING OFFICER ☐ PROPOSED REASSIGNMENT OF EMPLOYEE REPORTED ON ☐ COVERING INITIAL 30 DAYS OF EMPLOYMENT ☐

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES? ☒ YES ☐ NO IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES? ☒ YES ☐ NO IF SO, WHAT DUTY OR DUTIES **Processing CB reports, duties other than field operations**

DO YOU CONCUR IN EMPLOYEE'S DESCRIPTION OF DUTIES UNDER SECTION 2? ☒ YES ☐ NO IF NO, EXPLAIN IN SECTION 11  
 HAS EMPLOYEE STRIVEN FOR PROFESSIONAL IMPROVEMENT? ☒ YES ☐ NO DO YOU RECOMMEND EMPLOYEE FOR PROMOTION? ☒ YES ☐ NO IF SO, TO WHAT GRADE AND FOR WHAT POSITION? **Next Grade**

9. FOR EACH FACTOR OBSERVED CHECK THE APPROPRIATE BOX TO INDICATE HOW THE EMPLOYEE COMPARES WITH ALL OTHERS OF THE SAME CLASSIFICATION WHOSE PROFESSIONAL ABILITIES ARE KNOWN TO YOU PERSONALLY. DO NOT LIMIT THIS COMPARISON TO THE OTHERS NOW UNDER YOUR SUPERVISION. DO NOT HESITATE TO MARK "NOT OBSERVED" ON ANY QUALITY WHEN APPROPRIATE.

RATING FACTORS	NOT OBSERVED	UNSATISFACTORY	FAIR	GOOD	VERY GOOD	EXCELLENT	OUTSTANDING
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE							
B. INTEREST AND ENTHUSIASM IN WORK							
C. SECURITY CONSCIOUSNESS							
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS							
E. ATTENTION TO DUTY							
F. JUDGMENT AND COMMON SENSE							
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE							
H. DISCRETION							
I. INITIATIVE							
J. ABILITY TO HANDLE AND DIRECT PEOPLE							
K. PERFORMANCE OF PRESENT DUTIES (ITEM 2)							
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION							
M. TACT							
N. SAGACITY (SHOWN-GULLIBILITY)							
O. LEADERSHIP							
P. PHYSICAL STAMINA							
Q. MENTAL STAMINA							

10. INDICATE YOUR ATTITUDE TOWARD HAVING THIS EMPLOYEE UNDER YOUR COMMAND OR SUPERVISION. WOULD YOU DEFINITELY ☐ PREFER NOT ☐ BE SATISFIED ☐ BE PLEASED ☐ PARTICULARLY ☒ NOT WANT HIM? TO HAVE HIM? TO HAVE HIM? TO HAVE HIM? DESIRE HIM?

11. ENTER HERE ANY DESIRED REMARKS PERTAINING TO PARTICULAR QUALIFICATIONS OR LACK THEREOF WHICH ARE CONSIDERED PERTINENT TO THE EVALUATION OF THIS EMPLOYEE. OUTSTANDING ASSETS AND/OR SERIOUS LIMITATIONS SHOULD BE STATED ALSO REASONS FOR AND RECOMMENDATIONS AS TO REASSIGNMENT WILL BE GIVEN IF APPROPRIATE TO THIS REPORT.

(IF ADDITIONAL SPACE IS NEEDED, ATTACH EXTRA SHEET)

**Feb 18 '49**  
 DATE

(IF REVIEWING OFFICER OR CHIEF OF STATION DOES NOT CONCUR WITH THIS REPORT, EXCEPTIONS WILL BE STATED IN SPACE PROVIDED ON THE REVERSE SIDE HEREOF)

*W. C. [unclear]*  
 SIGNATURE OF REPORTING OFFICER





## STATUS AND EFFICIENCY REPORT

(2181)

(SEE INSTRUCTIONS ON REVERSE SIDE)

SECTIONS 1 THROUGH 6 WILL BE COMPLETED BY EMPLOYEE.

TYPEWRITER WILL BE USED, IF POSSIBLE.

1. NAME (PRINTED) LAST	FIRST	MIDDLE	CAS. RATING	SALARY	DATE OF ASSIGNMENT TO PRESENT DUTY
RIGGS	ROBERT	B.	7	\$397.20	17 April 1947

2. DESCRIPTION OF DUTIES SINCE LAST EFFICIENCY REPORT. (LIST MOST RECENT FIRST. DESCRIBE CONCISELY BUT FULLY)

Administrative Assistant to Chief of Mission.

3. IF COURSES OF INSTRUCTION WERE COMPLETED DURING PERIOD OF THIS REPORT, LIST TITLE, LOCATION OF SCHOOL, LENGTH OF COURSE AND DATE COMPLETED.

4. PROFICIENCY IN FOREIGN LANG.	READING			SPEAKING			UNDERSTANDING		
	EXC.	GOOD	FAIR	EXC.	GOOD	FAIR	EXC.	GOOD	FAIR
French		X			X			X	

5. MY PREFERENCE FOR NEXT DUTY AFTER TERMINATION OF CURRENT ASSIGNMENT IS: (IF IN US-50 STATE)

TYPE OF DUTY LOCATION

Indeterminable.

(LIST ONE OR MORE IN ORDER OF PREFERENCE)

6. HAVE THERE BEEN ANY CHANGES IN PERSONAL STATUS SINCE ORIGINAL EMPLOYMENT OR LAST REPORT - WHICHEVER IS LATER?

MARITAL STATUS ☒ YES ☒ NO NUMBER OF DEPENDENTS ☒ YES ☒ NO EMERGENCY ADDRESSEE ☒ YES ☒ NO LEGAL ADDRESS ☒ YES ☒ NO

IF THE ANSWER TO ANY OF THE ABOVE IS YES, ATTACH A SEPARATE DETAILED REPORT IN DUPLICATE HERETO. IN THE CASE OF MARRIAGE, THE REPORT WILL INCLUDE NAMES, ADDRESSES, AND CITIZENSHIP OF SPOUSE, FATHER-IN-LAW, MOTHER-IN-LAW, BROTHERS-IN-LAW AND SISTERS-IN-LAW.

7 July 1947

DATE

SECTIONS 7 THROUGH 11 TO BE COMPLETED BY IMMEDIATE SUPERVISOR

7. PERIOD COVERED BY THIS REPORT	OCCASION FOR REPORT
DATE FROM DATE TO	ANNUAL <input type="checkbox"/> REASSIGNMENT OF REPORTING OFFICER <input type="checkbox"/> PROPOSED REASSIGNMENT OF EMPLOYEE REPORTED ON <input type="checkbox"/> COVERING INITIAL 90 DAYS OF EMPLOYMENT <input checked="" type="checkbox"/>

8. IS THIS EMPLOYEE QUALIFIED TO PERFORM ALL PRESENT DUTIES? ☒ YES ☒ NO IS EMPLOYEE BETTER QUALIFIED FOR OTHER DUTIES? ☒ YES ☒ NO IF SO, WHAT DUTY OR DUTIES

DO YOU CONCUR IN EMPLOYEE'S DESCRIPTION OF DUTIES UNDER SECTION 2? ☒ YES ☐ NO IF NO, EXPLAIN IN SECTION 11

HAS EMPLOYEE STRIVEN FOR PROFESSIONAL IMPROVEMENT? ☒ YES ☐ NO DO YOU RECOMMEND EMPLOYEE FOR PROMOTION? ☒ YES ☐ NO IF SO, TO WHAT GRADE AND FOR WHAT POSITION?

9. FOR EACH FACTOR OBSERVED CHECK THE APPROPRIATE BOX TO INDICATE HOW THE EMPLOYEE COMPARES WITH ALL OTHERS OF THE SAME CLASSIFICATION WHOSE PROFESSIONAL ABILITIES ARE KNOWN TO YOU PERSONALLY. DO NOT LIMIT THIS COMPARISON TO THE OTHERS NOW UNDER YOUR SUPERVISION. DO NOT HESITATE TO MARK "NOT OBSERVED" ON ANY QUALITY WHEN APPROPRIATE.

RATING FACTORS	NOT OBSERVED	UNSATISFACTORY	FAIR	GOOD	VERY GOOD	EXCELLENT	OUTSTANDING
A. ABILITY TO WORK AND GET ALONG WITH PEOPLE					X		
B. INTEREST AND ENTHUSIASM IN WORK						X	
C. SECURITY CONSCIOUSNESS						X	
D. ABILITY TO GRASP INSTRUCTIONS AND PLANS						X	
E. ATTENTION TO DUTY							X
F. JUDGMENT AND COMMON SENSE						X	
G. ABILITY TO OBTAIN RESULTS AND GET THINGS DONE						X	
H. DISCRETION						X	
I. INITIATIVE					X		
J. ABILITY TO HANDLE AND DIRECT PEOPLE					X		
K. PERFORMANCE OF PRESENT DUTIES (ITEM 2)						X	
L. ABILITY TO EVALUATE INTELLIGENCE INFORMATION							X
M. TACT					X		
N. SAGACITY (NON-GULLIBILITY)					X		
O. LEADERSHIP				X			
P. PHYSICAL STAMINA					X		
Q. MENTAL STAMINA						X	

10. INDICATE YOUR ATTITUDE TOWARD HAVING THIS EMPLOYEE UNDER YOUR COMMAND OR SUPERVISION. WOULD YOU DEFINITELY PREFER NOT TO HAVE HIM? ☐ BE SATISFIED ☐ BE PLEASED ☐ PARTICULARLY DESIRE HIM? ☒

11. ENTER HERE ANY DESIRED REMARKS PERTAINING TO PARTICULAR QUALIFICATIONS OR LACK THEREOF WHICH ARE CONSIDERED PERTINENT TO THE EVALUATION OF THIS EMPLOYEE. OUTSTANDING ASSETS AND/OR SERIOUS LIMITATIONS SHOULD BE STATED ALSO REASONS FOR AND RECOMMENDATIONS AS TO REASSIGNMENT WILL BE GIVEN IF APPROPRIATE TO THIS REPORT.

(IF ADDITIONAL SPACE IS NEEDED ATTACH EXTRA SHEET)

DATE

(IF REVIEWING OFFICER OR CHIEF OF STATION DOES NOT CONCUR WITH THIS REPORT, EXCEPTIONS WILL BE STATED IN SPACE PROVIDED ON THE REVERSE SIDE HEREOF)

Signature of Reporting Officer  
Signature of Reviewing Officer

UNDER NO CIRCUMSTANCES IS THIS REPORT TO BE SHOWN TO THE EMPLOYEE REPORTED ON

CONFIDENTIAL

TRAINING EVALUATION

1. The official to whom this report is entrusted is personally responsible for it. Although he may, within his discretion, show it to other members of his staff, the report should never be shown to the student whom it concerns.
2. In order to arrive at an unprejudiced and independent evaluation, this report was prepared without any knowledge of Appraisal results.
3. This report summarizes the important facts and the relevant observations which have been discovered about the student by the various instructors during the student's course of training. The more complete data on the student are available in the files of the Training Branch, and may be examined by contacting the Chief of the Staff Training Division.

STUDENT'S NAME Ann L. Goodpasture

BRANCH FBZ, Div. 1

TRAINING PERIOD OSO Class II  
6 Jan to 7 Feb 1947

DATE OF REPORT 13 February 1947

This student does qualify for the projected assignment as administrative assistant. Her understanding of the general aims and nature of intelligence work, of the mission of this organization and of foreign intelligence services is adequate for purposes of her assignment. She shows good judgment and common sense, is observant, methodical, and careful in the collection of her facts, and writes clear and concise reports. Her work in reporting was well above average. Under good supervision she may be capable of handling in addition to her assigned duties, also those of an editorial analyst.

FOR THE ACTING CHIEF, TRB:

*John Gerty*  
JOHN GERTY  
Chief, Staff Training Division

Orig: Acting Chief, FBZ  
cc : Chief, Div. 1  
cc : Chief of Operations

ADDRESS  
MANAGER  
BRANCH REGIONAL OFFICE  
FOURTH U. S. CIVIL SERVICE REGION  
161 INDIANA AVENUE N.W.  
WASHINGTON 25, D. C.

UNITED STATES CIVIL SERVICE COMMISSION  
FOURTH UNITED STATES CIVIL SERVICE REGION  
BRANCH REGIONAL OFFICE, WASHINGTON 25, D. C.

IN YOUR REPLY REFER TO  
FILE **480,10,17**  
AND DATE OF THIS LETTER

June 6, 1948


Chief, Civilian Personnel Branch  
Office of Strategic Services  
Washington 25, D. C.

Dear Sir:

As a result of investigation the person named below has  
been rated eligible on suitability.

<u>Name and Address</u>	<u>Position</u>
Miss Ann Lorena Goodpasture c/o Office of Strategic Services Washington 25, D. C.	Clerk Stenographer Regulation IX, section 2b O. S. S. - Outpost (New Delhi, India)

Very respectfully,

  
T. D. Dunn  
Associate Regional Director

cc: Miss Goodpasture

RECEIVED  
JUN 8 3 18 PM '48

RECEIVED

ATTN: MR. DUNN  
BRANCH REGIONAL OFFICE  
FOURTH U. S. CIVIL SERVICE REGION  
400 INDIANA AVENUE N.E.  
WASHINGTON 25, D. C.

UNITED STATES CIVIL SERVICE COMMISSION  
FOURTH UNITED STATES CIVIL SERVICE REGION  
BRANCH REGIONAL OFFICE, WASHINGTON 25, D. C.

IN YOUR REPLY REFER TO  
FILE 4BRO:IC:LN  
AND DATE OF THIS LETTER

June 6, 1948

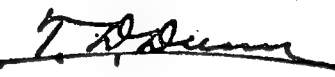
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Very respectfully,

  
T. D. Dunn  
Associate Regional Director

cc: Miss Goodpasture

## REPORT OF EFFICIENCY RATING

ADMINISTRATIVE-UNOFFICIAL  
OFFICIAL: REGULAR PROBATIONAL or TRIAL PERIOD

As of 31 March 1945 based on performance during period from 26 Jan 1945 to 31 March 1945

Ann I. Goodpasture  
(Name of employee)

Clerk-Steno CAF-5 \$2000 p.m.  
(Title of position, service, and grade)

Office of Strategic Services P & A New Delhi, India  
(Organization—Indicate bureau, division, section, unit, field station)

ON LINES BELOW MARK EMPLOYEE	1. Study the instructions in the Rating Official's Guide, C. S. C. Form No. 3823A. 2. Underline the elements which are especially important in the position. 3. Rate only on elements pertinent to the position. a. Do not rate on elements in <i>italics</i> except for employees in administrative, supervisory, or planning positions. b. Rate administrative, supervisory, and planning functions on elements in <i>italics</i> .	CHECK ONE: Administrative, supervisory, or planning <input checked="" type="checkbox"/> <b>Code 24</b> All others <input type="checkbox"/>
---------------------------------	---	--

- |   |   |
|---|---|
| <u>+</u> (1) Maintenance of equipment, tools, instruments.  | _____ (21) Effectiveness in planning broad programs.  |
| _____ (2) Mechanical skill.   | _____ (22) Effectiveness in adapting the work program to broader or related programs.                   |
| <u>+</u> (3) Skill in the application of techniques and procedures.                               | _____ (23) Effectiveness in devising procedures.  |
| <u>+</u> (4) Presentability of work (appropriateness of arrangement and appearance of work).      | _____ (24) Effectiveness in laying out work and establishing standards of performance for subordinates. |
| _____ (5) Attention to broad phases of assignments.   | _____ (25) Effectiveness in directing, reviewing, and checking the work of subordinates.                |
| <u>+</u> (6) Attention to pertinent detail.   | _____ (26) Effectiveness in instructing, training, and developing subordinates in the work.             |
| <u>+</u> (7) Accuracy of operations.  | _____ (27) Effectiveness in promoting high working morale.  |
| _____ (8) Accuracy of final results.  | _____ (28) Effectiveness in determining space, personnel, and equipment needs.                          |
| _____ (9) Accuracy of judgments or decisions.   | _____ (29) Effectiveness in getting and obtaining adherence to time limits and deadlines.               |
| _____ (10) Effectiveness in presenting ideas or facts.  | _____ (30) Ability to make decisions.   |
| <u>+</u> (11) Industry.   | _____ (31) Effectiveness in delegating clearly defined authority to act.                                |
| <u>+</u> (12) Rate of progress on or completion of assignments.                                   |   |
| _____ (13) Amount of acceptable work produced. (Is mark based on production records? (Yes or no)) |   |
| _____ (14) Ability to organize his work.  |   |
| _____ (15) Effectiveness in meeting and dealing with others.                                      |   |
| <u>+</u> (16) Cooperativeness.  |   |
| _____ (17) Initiative.  |   |
| _____ (18) Resourcefulness.   |   |
| <u>+</u> (19) Dependability.  |   |
| _____ (20) Physical fitness for the work.   |   |

STATE ANY OTHER ELEMENTS CONSIDERED

- \_\_\_\_\_ (A) \_\_\_\_\_  
\_\_\_\_\_ (B) \_\_\_\_\_  
\_\_\_\_\_ (C) \_\_\_\_\_

<b>STANDARD</b> Deviations must be explained on reverse side of this form	Adjective rating
Plus marks on all underlined elements, and no minus marks. <u>E</u>	Excellent
Plus marks on at least half of the underlined elements, and no minus marks.	Very good
Check marks or letter on a majority of underlined elements, and any minus marks overcompensated by plus marks.	Good
Check marks or better on a majority of underlined elements, and minus marks not overcompensated by plus marks.	Fair
Minus marks on at least half of the underlined elements.	Unsatisfactory
	Rating official <u>E</u>
	Reviewing official <u>E</u>

Rated by Joseph R. Coolidge Chief, R & A Sec. Det 303 24 April 1945  
(Signature of rating official) (Title) (Date)  
Reviewed by E. W. Ryan Major, G. C. 24 April 1945  
(Signature of reviewing official) (Title) (Date)  
Rating approved by efficiency rating committee 6/1/45 Report to employee Excellent  
(Date) (Advisory rating)

SECRET

**ELECTION, DECLINATION, OR WAIVER  
OF LIFE INSURANCE COVERAGE**  
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT  
AGENCY INSTRUCTIONS  
ON BACK OF ORIGINAL**

**TO COMPLETE THIS FORM—**

**1**

**FOLLOW THESE GENERAL INSTRUCTIONS:**

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach any part.

**2**

**FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):**

NAME (last)	(first)	(middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER		
Goodpasture	Ann	Lorene	November 28, 1918	446	14	9768
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, ZIP Code)			
051303						

**3**

**MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):**

Mark here  
if you  
**WANT BOTH**  
optional and  
regular  
insurance

☐  
(A)

**ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE**

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here  
if you  
**DO NOT WANT**  
**OPTIONAL** but  
do want  
regular  
insurance

☒  
(B)

**DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE**

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here  
if you  
**WANT NEITHER**  
regular nor  
optional  
insurance

☐  
(C)

**WAIVER OF LIFE INSURANCE COVERAGE**

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

**4**

**SIGN AND DATE. IF YOU MARKED BOX "A" OR "C",  
COMPLETE THE "STATISTICAL STUB." THEN RETURN  
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

*Ann L. Goodpasture*

DATE

12 February 1968

**FOR EMPLOYING OFFICE USE ONLY**

(official receiving date stamp)

90119 10 10 1968  
RECEIVED

89. HY 64 01 51 MAY

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM No. 176-T  
JANUARY 1968  
(For use only until April 14, 1968)  
176-101

CONFIDENTIAL  
(When Filled In)

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Handbook 20-4, Employee Conduct, dated 7 October 1963, and the information brochure for PCS returnees, dated May 1964.

John L. Goodenough  
Signature

41 Nov 1968  
Date

JOHN L. GOODENOUGH

CONFIDENTIAL  
(When Filled In)



**CONFIDENTIAL**  
(When Filled In)

<small>INSTRUCTIONS: COMPLETE IN DUPLICATE. THE DATA RECORDED ON THIS FORM IS ESSENTIAL IN DETERMINING TRAVEL EXPENSES ALLOWABLE IN CONNECTION WITH LEAVE AT GOVERNMENT EXPENSE, OVERSEAS DUTY, RETURN TO RESIDENCE UPON SEPARATION, AND FOR PROVIDING CURRENT RESIDENCE AND DEPENDENCY INFORMATION REQUIRED IN THE EVENT OF AN EMPLOYEE EMERGENCY. THE ORIGINAL OF THIS FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.</small>			
NAME OF EMPLOYEE (Last) (First) (Middle) GOODPASTURE ANN L			
1. RESIDENCE DATA			
PLACE OF RESIDENCE WHEN APPOINTED CELENA TENN		LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad) NONE	
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE SAME			
2. MARITAL STATUS			
CHECK (X) ONE: <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED			
IF MARRIED, INDICATE PLACE OF MARRIAGE NA		DATE OF MARRIAGE —	
IF DIVORCED, PLACE OF DIVORCE DECREE NA		DATE OF DECREE —	
IF WIDOWED, INDICATE PLACE SPOUSE DIED NA		DATE SPOUSE DIED —	
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S) NA			
3. MEMBERS OF FAMILY			
NAME OF SPOUSE NA		ADDRESS (No., Street, City, Zone, State) —	
TELEPHONE NUMBER —			
NAMES OF CHILDREN NA		ADDRESS —	
SEX —		AGE —	
NAME OF FATHER (Or male guardian) C.H. Goodpasture		ADDRESS P.O. Box 822, TIPTON, OKLA	
TELEPHONE NUMBER NORTH 7-4124			
NAME OF MOTHER (Or female guardian) ANN H. Goodpasture		ADDRESS ..	
TELEPHONE NUMBER ..			
WHAT MEMBER(S) OF YOUR FAMILY HAS BEEN TOLD OF YOUR AFFILIATION WITH THE AGENCY FOR EMERGENCY PURPOSES? NONE			
4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY			
NAME (Mr., Mrs., Miss) (Last-First-Middle) C.H. Goodpasture		RELATIONSHIP FATHER	
HOME ADDRESS (No., Street, City, Zone, State) P.O. Box 822 TIPTON OKLA		HOME TELEPHONE NUMBER NORTH 7-4124	
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE ..		BUSINESS TELEPHONE & EXTENSION ..	
IS THE INDIVIDUAL NAMED ABOVE HITTING OF YOUR AGENCY AFFILIATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
THE PERSONS NAMED IN ITEM 3 ABOVE MAY ALSO BE NOTIFIED IN CASE OF EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 6 ON THE REVERSE SIDE OF THIS FORM.			
5. VOLUNTARY ENTRIES			
INDICATE ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS Riggs NATIONAL BANK, 17th G, WASH D.C.			
CONTINUED ON REVERSE SIDE			
CURRENT RESIDENCE AND DEPENDENCY REPORT			

CONFIDENTIAL  
(When Filled In)

5. (CONTINUED)		
IN WHOSE NAME(S) ARE THE ACCOUNTS LISTED?		
ALVIN L. GOODPASTER		
HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES", WHERE IS DOCUMENT LOCATED?		
HAVE YOU EXECUTED A POWER OF ATTORNEY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO. IF "YES", WHO POSSESSES THE POWER OF ATTORNEY?		
Riggs Bank		
6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS		
NONE		
SIGNED AT	DATE	SIGNATURE
	15 Nov 59	Alvin L. Goodpastor

CONFIDENTIAL

SECRET

19 February 1959

MEMORANDUM TO:

GOODPASTURE, ANN L.

GUINAND, Alice B.

SUBJECT:

Commendation for Extra Work in Connection With  
Visit of General Cassidy

1. Please accept my personal thanks for the spirit in which you engaged in long and tedious hours of work in connection with the preparation of the charts for General Cassidy's visit.

2. Because of the voluntary nature of this contribution on your parts, and the inability on my own part to adequately demonstrate the appreciation of our mutual employer in a more practical manner, I am asking Headquarters to place a copy of this letter in your personnel files.

Distribution

Winston M. Scott

Orig -

GOODPASTURE

GUINAND

cc - Station

personnel file GOODPASTURE

cc - Station

personnel file GUINAND

cc - Hqs

personnel file GOODPASTURE

→ cc - Hqs

personnel file GUINAND

SECRET

SECRET

CP Copy

FIELD REASSIGNMENT QUESTIONNAIRE			
DO NOT COMPLETE - FOR HEADQUARTERS USE ONLY.			
AUTHENTICATION OF SIGNATURES AND VERIFICATION OF ITEMS 1 THROUGH 7 BELOW:			
NAME OF EMPLOYEE (true)	DATE (from item 1-2)	NAME OF SUPERVISOR (true)	DATE (from item 1-2)
GOODPASTURE, Ann L.	3 Oct 58	Winston M. Scott	3 Oct 58
NAME AND SIGNATURE OF OFFICIAL AT HEADQUARTERS AUTHORIZED TO AUTHENTICATE SIGNATURES AND VERIFY DATA IN ITEMS NOS. 1 THROUGH 7 BELOW:			DATE
J. Washinke, WH/Pers			23 Oct 58
TO BE COMPLETED BY EMPLOYEE			
1. DATE OF BIRTH	2. GRADE	3. CURRENT POSITION TITLE	
28 November 1918	GS-12	Intelligence Officer	
4. SERVICE DESIGNATION (if known)	5. CURRENT STATION OR FIELD BASE	7A. EXPECTED RATE OF DEPARTURE FROM FIELD	
KUTIEB	Mexico City	5 May 1959	
6. OTHER DUTY STATIONS OR FIELD BASES DURING CURRENT TOUR		7B. EXPECTED DATE OF ARRIVAL AT HEADQUARTERS PCS	
8. WRITE A DESCRIPTION OF YOUR MAJOR DUTIES DURING THE CURRENT TOUR OF DUTY (see special note on Transmittal Form):			
<p>CE Officer working on anti-Soviet sensitive operations.  Flaps and Seals and photographic processing.</p>			
9. PREFERENCE FOR NEXT ASSIGNMENT:			
A. WRITE A BRIEF DESCRIPTION OF THE TYPE OF WORK YOU WOULD PREFER FOR YOUR NEXT ASSIGNMENT IF IT DIFFERS FROM THAT INDICATED IN ITEM NO. 8, ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICES.			
<p>CE Officer  Any job for which my past experience and training qualifies me.</p>			
B. INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE IN ORDER TO INCREASE YOUR VALUE TO THE ORGANIZATION (refer to catalog of courses, if available):			
<p>Three months intensive language training.</p>			

SECRET

D. PREFERENCE FOR NEXT ASSIGNMENT (continued)	
C. INDICATE YOUR PREFERENCE FOR NEXT ASSIGNMENT BY INSERTING NUMBERS 1, 2 AND 3 (for 1st, 2nd and 3rd choices) IN THE BOXES BELOW:	
<input type="checkbox"/> RETURN TO MY CURRENT STATION	
<input checked="" type="checkbox"/> BE ASSIGNED TO HEADQUARTERS FOR A TOUR OF DUTY, WITH RESPECT TO POSSIBLE ASSIGNMENT IN HEADQUARTERS, INDICATE CHOICE OF COMPONENT:	
1ST. CHOICE _____ 2ND. CHOICE _____ 3RD. CHOICE _____	
<input checked="" type="checkbox"/> BE ASSIGNED TO ANOTHER FIELD STATION, WITH RESPECT TO POSSIBLE REASSIGNMENT TO ANOTHER FIELD STATION, INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIFIC STATION, BASED ON QUALIFICATIONS:	
1ST. CHOICE <u>VH Div (post to be selected by HQS)</u> 2ND. CHOICE <u>Lisbon</u> 3RD. CHOICE _____	
10. HOW MUCH LEAVE DO YOU DESIRE BETWEEN ASSIGNMENTS? INDICATE NUMBER OF WORK DAYS <u>30</u>	
11. INDICATE THE NUMBER AND AGE OF DEPENDENTS WHO WILL BE TRAVELLING OR MOVING WITH YOU:  <u>None</u>	
12. SIGNATURE: COMPLETE ITEM NO. S-1, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF ABOVE PORTION OF THIS FORM. TO BE COMPLETED BY SUPERVISOR AT FIELD STATION.	
13. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE STATION, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:  <u>It is requested that this officer be returned to Mexico City for another two (2) year tour. This officer is one of the most able CE officers COS has known and his transfer from this Station would leave a vacancy very, very hard to fill with an equally capable person. Attempts to arrange other than tourist cover will be made for this next tour.</u>	
14. SIGNATURE: COMPLETE ITEM NO. S-2, TRANSMITTAL SHEET, TO INDICATE COMPLETION OF THIS PORTION OF THE FORM. TO BE COMPLETED BY APPROPRIATE PERSONNEL OFFICER AT HEADQUARTERS	
15. IN CONSIDERATION OF THE PAST EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS EXPRESSED PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF THE COMPONENT TO WHICH HE IS CURRENTLY ASSIGNED, INDICATE YOUR RECOMMENDATIONS FOR HIS NEXT ASSIGNMENT AND TRAINING:  <u>If regular Embassy cover can be arranged, recommend additional tour Mexico City</u>	
16. NAME OF PERSONNEL OFFICER <u>Robert N. DAHLGREN</u> DATE <u>21 October 1958</u>	SIGNATURE <u>Robert N. Dahlgren</u>
FOR USE OF CAREER SERVICE	
17. EMPLOYEE <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT BEEN NOTIFIED OF PLANNED REASSIGNMENT	18. REFERENCE DISPATCH NO. _____ CABLE NO. _____
19. TYPED OR PRINTED NAME	20. SIGNATURE
21. TITLE	22. DATE
23. COMMENTS <u>I would like to return to Mexico City. I like the people at this Station and the work; however, I am on a tourist card which, in my case, I don't feel can be securely stretched over another two-year tour. Since there is no prospect of other cover, I would like to be assigned to another VH Station. In view of my grade and type of experience, I feel that VH Div personnel officer can best determine the location where I could be most useful if such a vacancy exists in VH. My 2nd choice is Lisbon because I have previously worked with the present Chief of Station there.</u>	

SECRET



SECRET

CENTRAL INTELLIGENCE AGENCY  
WASHINGTON 25-D. C.

OFFICE OF THE DIRECTOR

3 APR 1956

MEMORANDUM FOR: Ann L. Goodpasture

SUBJECT: Notification of Membership in the Career Staff

1. On behalf of the Director of Central Intelligence, it gives me pleasure to inform you that your application for membership in the Career Staff has been accepted by the CIA Selection Board. The effective date of your membership is 1 July 1954.

2. Please indicate that you have received this notification by signing in the space provided below and return it to the Head of your Career Service. He will forward it to the Executive Director of the CIA Selection Board.

3. Because your membership in the Career Staff is classified information, it is necessary that this notification be conveyed to you in this manner. The application for membership which you signed has been endorsed on behalf of the Director of Central Intelligence by the Executive Director of the CIA Selection Board and placed in your permanent Official Personnel Folder.

FOR THE DIRECTOR OF CENTRAL INTELLIGENCE

Harrison G. Reynolds  
Chairman, CIA Selection Board

Noted:

Date: 9 April 1956

Career Service Staff  
Office of Personnel

15 MAY 1956

SECRET

SECRET

12 July 54

CAREER SERVICE QUI				NAIRE			
<b>SECTION I</b>							
NAME (Last)		(First)		(Middle)		AGE	GRADE
GOODPASTURE		Ann		L.		35	GS-11
NO. OF MOS. IN PRESENT POSITION		NO. OF MOS. IN OSS		NO. OF MOS. IN CIG		NO. OF MOS. IN CIA	
20		22		84			
STAFF OR DIVISION		BRANCH		POSITION TITLE			
				Intel. Officer			
DATA ON ALL PERMANENT DUTY OVERSEAS OR IN U.S. FIELD (Include any TDY during last two years)							
APPROXIMATE DATES OF SERVICE		LOCATION		TDY	PCS	COMMENTS	
FROM	TO	COUNTRY	STATION				
Oct 44	March 46	India	New Delhi		X		
		Ceylon	Kandy	X			
		China	Kunming		X		
			Shanghai		X		
Apr 46	Feb 47	U.S.	Hqtrs		X		
Feb 47	Feb 49	India	Bombay		X		
Mar 49	May 51	U.S.	Hqtrs		X		
June 51	Oct 53	Mexico	Monterrey		X	Apr-May 54 TDY Guatemala	
Nov 53	Jul 54	U.S.	Lincoln	X		Guatemala City.	
INDICATE WILLINGNESS TO SERVE TOUR OF DUTY OVERSEAS PCS							
A <input checked="" type="checkbox"/> YES B <input type="checkbox"/> ONLY UNDER CERTAIN CONDITIONS C <input type="checkbox"/> NO							
INDICATE ASSIGNMENT PREFERENCE IF PRECEDING ANSWER IS "A" OR "B"							
PREFERENCE	COUNTRY	STATION	TYPE OF POSITION				
1ST	Germany	No preference	Intel. Off.				
2ND	Any European Country						
3RD	Any Country						
IF ANSWER ABOVE IS "B" STATE CONDITIONS; IF ANSWER ABOVE IS "C" EXPLAIN YOUR REASONS							
INDICATE GEOGRAPHIC AREAS OVERSEAS IN WHICH YOU WILL NOT SERVE AND EXPLAIN REASONS							
None							
INDICATE RELATIONSHIP AND AGE OF EACH DEPENDENT TO BE MOVED OVERSEAS							
None at present time.							
INDICATE KNOWN MEDICAL RESTRICTIONS WHICH THE AGENCY HAS IMPOSED ON YOUR SERVICE							
Hearing impairment which in the past has not prevented overseas duty.							

SECRET

INDICATE ANY UNUSUAL CIRCUMSTANCES CONCERNING DEPENDENTS (old age, chronic illness, need for special educational facilities, etc.) OR ANY UNUSUAL PERSONAL SITUATION WHICH WOULD AFFECT YOUR OVERSEAS ASSIGNMENT

None at present time.

DESCRIBE TYPES OF HEADQUARTERS AND U.S. FIELD POSITIONS FOR WHICH YOU WOULD LIKE TO BE CONSIDERED AND THE ORGANIZATIONAL COMPONENT IN WHICH YOU WOULD LIKE TO SERVE

Intelligence Officer or case officer. I am willing (but not eager) to do administrative work.

REMARKS

DATE  
12 July 1954

SIGNATURE OF EMPLOYEE

*[Handwritten Signature]*

SECTION II

(To be completed by employee's supervisor)

INDICATE APPROXIMATE TIME (months) WHEN EMPLOYEE CAN BE MADE AVAILABLE FOR OVERSEAS SERVICE

INDICATE APPROXIMATE TIME (months) WHEN EMPLOYEE CAN BE MADE AVAILABLE FOR ANOTHER HEADQUARTERS OR U.S. FIELD ASSIGNMENT

COMMENTS ON AVAILABILITY AND EMPLOYEE'S PREFERENCE FOR NEXT ASSIGNMENT

DATE

SIG.

HC

SUPERVISOR

PRESTON, Administrative Official

PERSONNEL OFFICER WILL FORWARD ORIGINAL TO OFFICE OF PERSONNEL

1ST COPY TO APPROPRIATE CAREER SERVICE BOARD

SECRET

\*MAY BE CONTINUED UNDER REMARKS



F02/50

החברות: **התאחדות המורים** ו**התאחדות הילדים**

**CENTRAL INTELLIGENCE AGENCY**

**2430 E STREET NW.  
WASHINGTON 25, D. C.**

Date 28 May 1951

Dear Miss Ann Goodpasture

1. This is to notify you that the United States Government, as represented by the Central Intelligence Agency, has accepted your employment effective

Position: Intelligence Officer

Base Salary: \$4600.00

2. You will be:

a. Entitled to annual and sick leave in accordance with Civil Service Commission rules and regulations, or such other provisions of law or regulations as may be established in lieu thereof.

b. Reimbursed for travel expenses in accordance with CIA Regulations or Standardized Government Travel Regulations, as amended.

c. If stationed outside continental United States, granted such monetary allowances as are prescribed by CIA Regulations.

3. As a condition of your employment by the Central Intelligence Agency, you are subject to assignment to tours of duty at posts outside the continental United States. Each time you are so assigned, unless otherwise specified in advance by CIA, you will be required to remain at the post to which assigned for a period of 24 months from the date of arrival thereat, unless sooner transferred, reassigned or separated for reasons beyond your control. If you wish to return to the United States for personal reasons during that period, all travel and transportation costs incident to such return will be borne by you, with no expense to the Government.

4. If this employment is for assignment to an overseas post, it is understood and agreed that, unless earlier separated for reasons beyond your control, you will remain in Government service for 12 months after your arrival at your first overseas post, and if you violate this agreement, any money expended by the United States on account of your travel and the transportation of your immediate family and household goods will be considered a debt due to the United States.

5. Employment is conditioned upon satisfactory completion of the training courses prescribed by CIA and satisfactory performance of duty for a total period of six months from date of employment. In the event

-2-

either training or performance of duty is deemed unsatisfactory by CIA, you will be offered other types of employment if available, or your employment will be terminated.

6. Your appointment is for such time as your services may be required and funds are available for the work of CIA. Notice of termination will be given you by procedure similar to that provided by Civil Service rules and regulations.

Ronald V. Mulesky  
Official authorized to sign letters of appointment.

I accept the above agreement as a condition of my employment by CIA.

Ann L. Genderson  
Employee

1 June 1951  
Date

## APPOINTMENT AFFIDAVITS

**IMPORTANT.**—Before swearing to these appointment affidavits, you should read and understand the attached information for appointee.

CENTRAL INTELLIGENCE AGENCY

(Department or agency)

(Bureau or division)

WASHINGTON, D. C.

(Place of employment)

I, ANN L. GOODPASTURE, do solemnly swear (or affirm) that—

### A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

### B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

### C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

### D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

### E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers contained in my Application for Federal Employment, Form No. 57, dated \_\_\_\_\_, 19\_\_\_\_, filed with the above-named department or agency, which I have reviewed, are true and correct as of this date with the exceptions noted in the Declaration of Appointee on the reverse of this form. (If no exceptions, write "None" on the Declaration of Appointee.)

Ann L. Goodpasture  
(Signature of appointee)

Subscribed and sworn before me this 21st day of March, A. D. 1949,  
at Washington D. C.  
(City) (State)

Chapter 143, Title II, Sec. 26  
Act of June 26, 1949

Elizabeth Morrison  
(Signature of officer)

Appointment Clerk  
(Title)

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

## DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Question 3 is to be answered in all cases, otherwise answer only those questions which require an answer different from that given to the corresponding questions on your application form. If no answers are different, write "NONE" in Item 10, below. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (street and number, city and State) <u>5725 COUN AVE N.W. APT. 19 WASH. D.C.</u>			
2. (A) DATE OF BIRTH <u>Nov 28, 1918</u>		(B) PLACE OF BIRTH (city or town and State or country) <u>CELINA, TENNESSEE, U.S.A.</u>	
3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY <u>C. E. SCOTLAND</u>	(B) RELATIONSHIP <u>FATHER</u>	(C) STREET AND NUMBER, CITY AND STATE <u>752 E. MAIN ST. TPTON, CALA.</u>	(D) TELEPHONE NO. <u>123</u>

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? ☐ YES ☒ NO  
If so, for each such relative fill in the blanks below. If additional space is necessary, complete under Item 10.

NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MARRIED (Check one)	SINGLE (Check one)
		1. _____ 2. _____ 3. _____			
		1. _____ 2. _____ 3. _____			
		1. _____ 2. _____ 3. _____			

INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	ITEM NO.	10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY
5. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X			
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? <i>If your answer is "Yes", give details in Item 10.</i>		X		
7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? <i>If your answer is "Yes", give in Item 10 reason for retirement, that is age, optional disability, or by reason of voluntary or involuntary separation after 5 years' service, amount of retirement pay, and under what retirement act, and rating, if retired from military or naval service.</i>		X		
8. HAVE YOU EVER BEEN DISCHARGED, OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? <i>If your answer is "Yes", give in Item 10 the name and address of employer, date, and reason in each case.</i>		X		
9. SINCE YOUR 17TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING, OR CONVICTED, FINED OR IMPRISONED OR PLACED ON PROBATION OR HAVE YOU EVER BEEN ORDERED TO DEPOSIT BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF \$25 OR LESS WAS IMPOSED)? <i>If your answer is "Yes", list all such cases under Item 10. Give in each case: (1) The date, (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any, or other disposition of the case. If appointed, your fingerprints will be taken.</i>		X		

### INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that this appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, suitability in connection with any record of recent discharge or arrest, and particularly for the following:

(1) *Identity of appointee.*—The appointee's signature and handwriting are to be compared with the application and other pertinent papers. The physical appearance may be checked against the medical certificate. The appointee may also be questioned on his personal history for agreement with his previous statements.

(2) *Age.*—If definite age limits have been established for the position, it should be determined that applicant is not outside the age range for appointment. Until such determination is made, the appointment may not be consummated.

(3) *Citizenship.*—The appointing officer is responsible for observing the citizenship provisions of (1) the Civil Service Rules and (2) appropriation acts. Form 51 constitutes an affidavit for both purposes and is acceptable proof of citizenship status in the absence of conflicting evidence. In doubtful cases the appointment should not be consummated until clearance has been secured from the certifying office of the Civil Service Commission.

(4) *Members of Family.*—Section 9 of the Civil Service Act provides that whenever there are already two or more members of a family serving under probational or permanent appointment in the competitive service, no other member of such family is eligible for probational or permanent appointment in the competitive service. The appointments of persons entitled to veteran preference are not subject to this requirement. The members-of-family provision does not apply to temporary appointments. Doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.

## AFFIDAVIT

## STRIKING AGAINST THE FEDERAL GOVERNMENT

WAR DEPARTMENT

(Dept. or Estab.)

WASHINGTON, D. C.

OFFICE OF ASSISTANT SECRETARY/SSU

(Bureau or Office)

(Place of Employment)

I, Ann L. Goodpasture, do hereby swear (or affirm) that I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not while a Government employee become a member of such an organization.

Ann L. Goodpasture  
(Signature of Employee or Appointee)

Subscribed and sworn to before me this 19th day of July, 1946 at Washington, State of D.C.

M. K. Haller

Act of June 26, 1943, Section 206

M. K. HALLER  
Admin. Asst  
SSU, War Dept.

**OATH OF OFFICE, AFFIDAVIT,  
AND  
DECLARATION OF APPOINTEE**

Research & Analysis  
Far East

Office of Strategic Services..... Military Supplies..... Washington, D. C.....  
(Department or Establishment) (Bureau or Division) (Place of Employment)

**A.**  
**OATH OF OFFICE**  
I, Ann L. Goodpasture  
Do solemnly swear (or affirm) that I will support and defend the constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter. SO HELP ME GOD.

**B.**  
**AFFIDAVIT**  
Do further swear (or affirm) that I do not advocate, nor am I a member of any political party or organization that advocates the overthrow of the Government of the United States by force or violence; and that during such time as I am an employee of the Federal Government, I will not advocate nor become a member of any political party or organization that advocates the overthrow of the Government of the United States by force or violence.

**C.**  
**DECLARATION OF APPOINTEE**  
Do further certify that (1) I have not paid or offered or promised to pay any money or other thing of value to any person, firm, or corporation for the use of influence to procure my appointment; (2) I will inform myself of and observe the provisions of the Civil Service law and rules and Executive orders concerning political activity, political assessments, etc., as quoted on the attached Information for Appointee, and (strike out either (3) or (4))  
(3) the answers given by me in the Declaration of Appointee on the reverse of this sheet are true and correct;  
(4) the answers contained in my Application for Federal Employment, Form No. ...., dated ..... 19....., filed with the above-named department or establishment, which I have reviewed, are true and correct as of this date, except for the following if necessary, use additional sheet; if no exceptions write "none"; if (4) is executed, the reverse of this sheet need not be used:

Subscribed and sworn before me this 29th day of February A. D., 19 44.

at Washington, D. C.  
(City) (State)

[SEAL]

Ann L. Goodpasture  
(Signature of Appointee)

Sylvia D. Carlson  
(Signature of Officer)

Notary Public  
(Title)

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown

My commission expires 12/21/46

16-32942-1

February 29, 1944  
(Date of Entrance on Duty)

Clerk-Steno. G&F-4-\$1800 per annum  
(Position to which appointed)

11-28-1918  
(Date of Birth)

## DECLARATION OF APPOINTEE

This form, if required, is to be completed before entrance on duty. Every question must be answered. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. False personation is a criminal offense and will be prosecuted accordingly.

1. Present Address 242 Delaware Ave S.W. Washington D.C.  
(Street and Number) (City and State)

2. Who should be notified in case of emergency? C. D. Goodpicture Father  
(Name) (Relationship)

Apiton, Oklahoma  
(Street and Number) (City and State)

3. Does the U. S. Government employ in a civilian capacity any relative of yours (father, brother, mother, wife or husband) with whom you live or have lived within the past 6 months? Yes or No? No. If so, for each such relative fill in the blanks below. If additional space is necessary, complete under item 12.

Name	Post-office address (Give street number, if any)	(1) Position and (2) Temporary or not and (3) Department or office in which employed	Relationship	Married or single	Age
1.					
2.					
3.					
1.					
2.					
3.					
1.					
2.					
3.					

4. Place of birth Celina Missouri Clay County  
(Town) (State or Country)

Indicate "Yes" or "No" answer by placing **X** in proper column

	Yes	No	12. Space for detailed answers to other questions.
5. Are you a citizen of the United States?	<b>X</b>		Write in left column numbers of items to which detailed answers apply
6. If foreign born, have you furnished proof of naturalization or citizenship to (1) the U. S. Civil Service Commission?			
(2) this agency in connection with this appointment?			
7. Since you filed application resulting in this appointment, has there been any change in the status of your citizenship, or of the persons through whom you gained your citizenship?		<b>X</b>	
8. (a) Do you hold any position or office under the United States or any State, Territory, County, or Municipality?		<b>X</b>	
If so, state the place, position, and salary under item 12.			
(b) Are you willing to resign such position or office if it becomes necessary to do so in order to hold the Federal position?		<b>X</b>	
9. Do you receive any pension or other benefit for military or naval service or an annuity from the U. S. or D. C. Government under any Retirement Act?		<b>X</b>	
If so, give details under item 12, stating whether you were retired for age, length of service, or disability; amount of retirement pay and under what retirement act and rank, if retired from military or naval service.			
10. Since you filed application resulting in this appointment, have you been discharged for misconduct or unsatisfactory service, or forced to resign from any position?		<b>X</b>	
If so, give under item 12 where employed, name and address of employer and the reason for discharge in each case.			
11. Since you filed application resulting in this appointment, have you been arrested, or summoned into any civil or military court as a defendant, or indicted for or convicted of any offense (felony or misdemeanor)?		<b>X</b>	
If so, for each case give under item 12 (1) the date, (2) the name and location of the court, (3) the nature of the offense or violation, and (4) the penalty, if any, imposed, or other disposition.			

## INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that this appointment would be in conformance with the Civil Service Act, applicable civil-service rules, the War Service Regulations, and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, purchase of office, suitability in connection with any record of record discharge or arrest, promise to observe provisions regarding political activity, and particularly for the following:

(1) Identity of appointee with the applicant whose appointment was authorized. The appointee's signature and handwriting are to be compared with the applicant's and other pertinent papers. The physical appearance may be checked against the medical certificate. The appointee may also be questioned on his personal history for agreement with his previous statements.

(2) Age.—If discrepancy exists between the date of birth and that on application, and if definite age limits have been established for the position, it should be determined that applicant is not outside the range for appointment.

(3) Citizenship.—The responsibility for provisions of appropriation, and any laws prohibiting or restricting the employment, rests with the appointing officer.

The Civil Service Commission indicates on applications showing foreign birth that citizenship has been verified. The appointing officer should verify citizenship if the list of eligibles or the letter of authority from the Commission indicates the appointment subject to proof of citizenship or if the application shows foreign birth but does not indicate on its face that citizenship has been proved. If the answer to question 4 of this form shows foreign birth and the application shows such in the United States, the case should be referred to the Civil Service Commission.

(4) Members of Family.—Section 9 of the Civil Service Act provides that when there are already two or more members of the family in the classified service, no other member of such family is eligible for appointment in that service. Minor do not establish a present family merely by living on an address different from that of the parents. Doubtful cases involving more than two members of family, including all pertinent evidence, should be referred to the Civil Service Commission for its duly authorized representative for decision. Under War Service Regulations, the member provision does not apply to temporary appointments for one year or less.



cler.

FORM 2070A  
AUGUST 1967

UNITED STATES CIVIL SERVICE COMMISSION  
WASHINGTON 25, D. C.

☐ REAPPOINTMENT FROM  
☒ TRANSFER FROM

War Relocation Authority  
(Office For Emergency Management)  
Washington, D.C.

CIVILIAN STRATEGIC SERVICES  
204 PM  
JAN 21, 1944

NAME Ann. L. Goodpasture  
D. O. B. 11/28/18  
POSIT. \$204.00 per Mo.  
LOCAT. Placement & Trng. Unit, Pers. Mg. Sec.  
Washington, D.C.

☐ REAPPOINTMENT TO  
☒ TRANSFER TO

Office of Strategic Services  
Washington, D.C.

POSIT. Clerk-Stenographer  
GR & SAL Cat-4, \$1800 p.a.  
LOCAT. Research & Analysis Far East  
Manpower and Military Supply  
Washington, D.C.

UNDER AUTHORITY DERIVING FROM WAR MANPOWER COMMISSION DIRECTIVE NO. 10 AND EXECUTIVE ORDERS 9245 AND 9063 THE ABOVE TRANSFER OR REAPPOINTMENT IS

☒ AUTHORIZED UNDER WAR SERVICE REGULATION 1K, SECTION 2b, EFFECTIVE ON OR AFTER THE DATE OF THIS NOTICE, AS AGREED UPON BY THE TWO AGENCIES CONCERNED, BUT IN NO CASE LATER THAN 10 DAYS FROM THE DATE OF THIS NOTICE, EXCEPT AT THE OPTION OF THE RECEIVING AGENCY, OR UNLESS OTHERWISE ORDERED BY THE CIVIL SERVICE COMMISSION. SUBJECT TO THE FOLLOWING CONDITIONS (IF ANY): Investigation

☐ **DISAPPROVED**

☐ (A) THE PERSON PROPOSED IS NOT ELIGIBLE

☐ (B) SUCH TRANSFER IS CONTRARY TO DIRECTIVES OF THE WAR MANPOWER COMMISSION

☐ CANCELED ON ADVICE FROM REQUESTING AGENCY.

Appointment of the applicant proposed by you is authorized. Your attention is called, however, to the nature of his reply or absence of a reply to question 16 on C.S. Form 57 concerning physical condition.

ENCLOSURE (IF APPROVED UNDER SECTION 4):  
STATEMENT OF REEMPLOYMENT BENEFITS  
TO BE FURNISHED TO EMPLOYEE

WAR TRANSFER UNIT-  
U. S. CIVIL SERVICE COMMISSION

**SECRET**  
(When Filled In)

### QUALIFICATIONS UPDATE

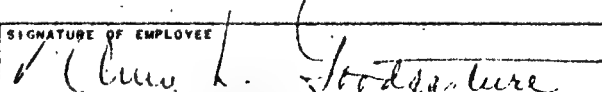
**READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS**

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

**PWB**

<b>SECTION I BIOGRAPHIC AND POSITION DATA</b>									
EMP. SER. NO. <b>057303</b>	NAME (Last-First-Middle) <b>GOODPASTURE, Ann L.</b>				DATE OF BIRTH <b>11/28/18</b>	SS <b>D</b>	GRADE <b>13</b>		
<b>SECTION II EDUCATION</b>									
<b>HIGH SCHOOL</b>									
LAST HIGH SCHOOL ATTENDED				ADDRESS (City, State, Country)		YEARS ATTENDED (From-To)		GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>COLLEGE OR UNIVERSITY STUDY</b>									
NAME AND LOCATION OF COLLEGE OR UNIVERSITY				SUBJECT		YEARS ATTENDED FROM-TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/ QTR. HRS. (Specify)
				MAJOR	MINOR				
1.									
2.									
IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.									
<b>TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS</b>									
NAME AND ADDRESS OF SCHOOL				STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
<b>OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE</b>									
NAME AND ADDRESS OF SCHOOL				STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1.									
2.									
<b>SECTION III MARITAL STATUS</b>									
1. PRESENT STATUS (Single, Married, Widened, Separated, Divorced, Annulled, Remarried) SPECIFY:									
2. NAME OF SPOUSE (Last) (First) (Middle) ( Maiden)									
3. DATE OF BIRTH				4. PLACE OF BIRTH (City, State, Country)					
5. OCCUPATION				6. PRESENT EMPLOYER					
7. CITIZENSHIP				8. FORMER CITIZENSHIP(S) COUNTRY(IES)				9. DATE U.S. CITIZENSHIP ACQUIRED	
<b>SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE</b>									
NAME		RELATIONSHIP	DATE AND PLACE OF BIRTH		CITIZENSHIP	PERMANENT ADDRESS			
1. <input type="checkbox"/> ADD									
<input type="checkbox"/> DELETE									
2. <input type="checkbox"/> ADD									
<input type="checkbox"/> DELETE									

**SECRET**  
(When Filled In)

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY--CHECK (X)			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
		JUN 14 9 22 AM '71					
SECTION VI TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (RPM)		2. SHORTHAND (RPM)		3. INDICATE SHORTHAND SYSTEM USED--CHECK (X) APPROPRIATE ITEM			
				<input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOGRAPH <input type="checkbox"/> OTHER SPECIFY:			
SECTION VII SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED.							
SECTION VIII MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?				2. NEW CLASSIFICATION			
<input type="checkbox"/> YES <input type="checkbox"/> NO							
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS				4. IF DEFERRED, GIVE REASON			
MILITARY RESERVE, NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG		<input type="checkbox"/> ARMY <input type="checkbox"/> NAVY		<input type="checkbox"/> MARINE CORPS <input type="checkbox"/> AIR FORCE		<input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> AIR NATIONAL GUARD	
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK		3. EXPIRATION DATE OF CURRENT OBLIGATION			
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED							
5. MILITARY MOBILIZATION ASSIGNMENT				6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED			
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		DATE COMPLETED			
SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)				DATE OF MEMBERSHIP	
						FROM    TO	
1.							
2.							
3.							
SECTION X REMARKS							
DATE		SIGNATURE OF EMPLOYEE					
							

**SECRET**

SECRET

LLC

(When Filled In)

OFFICIAL USE ONLY (until filled in)

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT				
READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS.				
SECTION I BIOGRAPHIC AND POSITION DATA				
1. EMP. SER. NO.	2. NAME (Last First Middle)	3. SEX	4. DATE OF BIRTH	5. SCHEDULE GRADE/STEP
057303	Goodpasture, Ann L.	F	11/28/18	13
6. SO	7. POSITION TITLE	8. OFFICE OF ASSIGNMENT	9. LOCATION (Country, City)	
D	Ops Officer	DDP/AS/1	Headquarters	
SECTION II AGENCY OVERSEAS SERVICE				
AREA	TYPE TOUR	FROM	TO	
OSS WWII Overseas not included				
India	PCS	4/47	12/48	
Mexico	PCS	7/51	11/53	
Guatemala	TDY	4/54	5/54	
Mexico	PCS	5/57	10/68	
Uruguay	TDY	3/67	4/67	
<div style="border: 1px solid black; padding: 10px; margin: 10px;"> <p><b>OVERSEAS DATA</b></p> <p><b>CODED</b></p> <p><b>DATE:</b> 08 JUL 1969 <b>INITIALS:</b> <i>AK</i></p> </div>				
SECTION III EDUCATION				
DEGREE	MAJOR FIELD	COLLEGE	YEAR	

FORM  
167 446J  
Mtg 2-67

SECRET

GROUP  
Excluded from automatic  
downgrading and declassification

(431)

69 AUG ENTB

FORM DSP-34 9-3-48 FORMERLY FS-312 APPLICATION FOR EMPLOYMENT IN THE FOREIGN SERVICE OF THE UNITED STATES		BUREAU NO. 47-2071.1 APPL. EXPIRES AUGUST 31, 1950 THIS SPACE FOR OFFICE USE ONLY	
INSTRUCTIONS—Answers to all questions must be typed or printed. All questions must be answered fully. If sufficient space has not been provided for your answer to any question, complete your answer under item # 27.		PREVIOUS <input type="checkbox"/> CARDER <input type="checkbox"/> ACKNOWLEDGED INDEXED <input type="checkbox"/> INVESTIGATED <input type="checkbox"/> ACTION CODE <input type="checkbox"/> OTHER <input type="checkbox"/>	
DATE OF APPLICATION		POSITION APPLIED FOR <b>Foreign Service Staff</b>	
THIS SPACE FOR OFFICE USE ONLY	1. NAME (Last) (First) (Middle) (Maiden, if any) <b>GOODPASTURE, Ann Lorena</b>		2. HAVE YOU EVER BEEN KNOWN BY ANY OTHER NAME? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF ANSWER IS "YES", GIVE FULL DETAILS UNDER ITEM #37.
	3a. PERMANENT ADDRESS (Place from which transportation will be authorized, if appointed. Street number and name) <b>3101 F Street, N.W.</b>		3b. STATE OF WHICH YOU ARE A LEGAL RESIDENT <b>Oklahoma</b>
	3d. CITY, POSTAL ZONE, STATE <b>Washington, 7, D.C.</b>		
	5. PRESENT ADDRESS IF DIFFERENT FROM ABOVE <b>Same as above</b>		PRESENT BUSINESS PHONE <b>Executive 6115</b>
	6. DATE OF BIRTH (Month day, year) <b>28 November 1918</b>		7. PLACE OF BIRTH (City, state, or country) <b>Colina, Tennessee</b>
8a. IF BORN OUTSIDE U.S. HOW WAS CITIZENSHIP ACQUIRED? <b>Not applicable</b>		8b. IF A NATURALIZED CITIZEN, PLACE, DATE, AND NUMBER OF NATURALIZATION CERTIFICATE <b>Not applicable</b>	
9. SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	10. HEIGHT 5 FT. 3 IN.	11. WEIGHT 115 LBS.	12. MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/> SEPARATED
13. WHAT IS THE LOWEST BASE SALARY, EXCLUSIVE OF ALLOWANCES YOU WILL ACCEPT? \$ PER ANNUM			
14. WHAT RESTRICTIONS ARE THERE IF ANY ON YOUR IMMEDIATE AVAILABILITY FOR DUTY IN ANY PART OF THE WORLD? <b>None</b>			
15. FULL NAME OF HUSBAND/WIFE (If wife, maiden name) <b>Not applicable</b>		D. DATE OF BIRTH <b>Not applicable</b>	C. PLACE OF BIRTH (City, state, or country) <b>Not applicable</b>
d. IF BORN OUTSIDE U.S. HOW WAS CITIZENSHIP ACQUIRED? <b>Not applicable</b>		e. IF NATURALIZED, PLACE, DATE, AND NUMBER OF NATURALIZATION CERTIFICATE. <b>Not applicable</b>	
16. DEPENDENTS			
NAME	RELATIONSHIP	DATE OF BIRTH	
<b>None</b>	<b>Not applicable</b>	<b>Not applicable</b>	
17. WHICH DEPENDENTS WOULD YOU WISH TO ACCOMPANY YOU ABROAD? <b>None</b>			
18a. FATHER'S NAME <b>C.H. Goodpasture</b>		b. PLACE OF BIRTH <b>Colina, Tennessee</b>	c. OCCUPATION <b>Retired</b>
d. PRESENT ADDRESS <b>Post Box 822, Tipton, Oklahoma</b>		e. IF BORN OUTSIDE U.S. DID FATHER EVER OBTAIN U.S. CITIZENSHIP? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
19a. MOTHER'S MAIDEN NAME <b>Anna W. Goodpasture</b>		b. PLACE OF BIRTH <b>Rickman, Tennessee</b>	c. OCCUPATION IF ANY <b>None</b>
d. PRESENT ADDRESS <b>Post Box 822, Tipton, Oklahoma</b>		e. IF BORN OUTSIDE U.S. DID MOTHER EVER OBTAIN U.S. CITIZENSHIP? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
20a. CAN YOU TAKE DICTATION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	D. ARE YOU A STENOGRAPHER? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	C. CAN YOU TYPE BY TOUCH SYSTEM? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	D. NAME OTHER OFFICE <b>Adding Machine</b>
<b>100</b> W.P.M.	<b>100</b> W.P.M.	<b>65</b> W.P.M.	

21. MILITARY STATUS						
3. IF YOU HAVE BEEN IN THE ARMED FORCES OR IN THE MERCHANT MARINE IN WHAT SERVICE AND BRANCH DID YOU SERVE? (e.g., U.S. Army: Field Artillery)			D. SERVICE OR SERIAL NUMBER			
Not applicable			Not applicable			
C. DATE OF ENTRY ON ACTIVE DUTY	D. RATE OR RANK AT TIME OF ENTRY	E. DATE OF HONORABLE DISCHARGE OR SEPARATION				
Not applicable	Not applicable	Not applicable				
F. RATE OR RANK AT TIME OF DISCHARGE OR SEPARATION		G. PRESENT RATE OR RANK IF ON ACTIVE DUTY				
Not applicable		Not applicable				
22a. WHAT PERTINENT FEDERAL CIVIL SERVICE EXAMINATIONS HAVE YOU TAKEN? (Give year, title, and grade received)						
None						
D. DO YOU HAVE A PERMANENT CIVIL SERVICE STATUS IN THE FEDERAL GOVERNMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			E. IF NOW EMPLOYED IN THE FEDERAL GOVERNMENT GIVE PRESENT GRADE AND DATE OF LAST CHANGE IN GRADE			
			GS-9 Feb 4, 1951			
23. HAVE YOU EVER APPLIED FOR A POSITION UNDER THE DEPARTMENT OF STATE OR TAKEN AN EXAMINATION FOR A POSITION UNDER THE DEPARTMENT OF STATE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IF ANSWER IS "YES" GIVE PARTICULARS UNDER ITEM #37.						
24. HAVE YOU EVER HELD A POSITION UNDER A FOREIGN GOVERNMENT? (Including service in the Armed Services of a Foreign power) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF ANSWER IS "YES" GIVE DETAILS UNDER ITEM #37.						
25. OUTLINE YOUR TRAVEL OR RESIDENCE ABROAD GIVING DATES, PURPOSE, AND PLACES. (If not while in the Armed Forces give number, date, and place of issuance of American passport.)						
War Dept. India, Ceylon, China 1944-1946 SP dated 1944, Washington, D.C.						
American Consulate General, Bombay, India, 1947-1948 SP #713, 13 March 1947, Washington, D.C.						
Nov-Dec 1948 Travel Bombay to U.S. leave enroute: Egypt, Greece, Italy, Switzerland.						
26. FOREIGN LANGUAGES (Name and indicate the extent of your competence, i.e., Excellent, Good, Fair, Poor, None)						
a. LANGUAGE	b. READ	c. WRITE	d. SPEAK	e. UNDERSTAND		
French	fair	fair	fair	fair		
27. EDUCATION						
a. GRADE SCHOOL — CIRCLE HIGHEST GRADE COMPLETED 1 2 3 4 5 6 7 8						
	NAME AND ADDRESS	DATES ATTENDED	YEARS COMPLETED	DEGREES CONFERRED	MAJOR SUBJECTS	SEMESTER HOURS CREDIT
b. HIGH SCHOOLS OR PREPARATORY SCHOOLS	Senior High School Tipton, Oklahoma	1932 1936	4	H.S. Diploma	General Arts and Sciences	
c. COLLEGES OR UNIVERSITIES	University of Oklahoma Norman, Oklahoma	1937 1941	4	B.S.	Education, Arts and Sciences	127
d. OTHER EDUCATIONAL INSTITUTIONS OR TRAINING SCHOOLS	Hills' University Oklahoma City, Oklahoma	Sept. 1941 Feb. 1942	1/2	None	Bus. Admin. Stenotypy	
28. EMPLOYMENT						
INSTRUCTIONS. (In the spaces provided below describe every position which you have held since you first began to work. Start with present position and work back to the first position which you held. Account for all periods of unemployment and state reasons of any unemployment indicated). Use continuation sheet if more space is required.						
PRESENT POSITION						
DATES OF EMPLOYMENT (Month, year) FROM: Mar. 1949 TO: March 1951			EXACT TITLE OF YOUR PRESENT POSITION Admin. Assistant		SALARY OR EARNINGS STARTING \$ 3978 PER YR. PRESENT \$ 4600 PER YR.	
PLACE OF EMPLOYMENT (City, state) Washington, D.C.			DESCRIPTION OF YOUR WORK  General administrative, personnel, and procurement duties. Preparation of reports in accordance with administrative procedures.			
NAME AND ADDRESS OF EMPLOYER CIA						
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU None						
NAME AND TITLE OF YOUR IMMEDIATE SUPERVISOR W.B. Smith						
REASON FOR DESIRING TO CHANGE EMPLOYMENT Desire to join Foreign Service			IF CURRENTLY EMPLOYED, WILL YOU REAPPROACH PRESENT EMPLOYER? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			

DATES OF EMPLOYMENT (Month, year) FROM: <b>Mar 1947</b> TO: <b>March 1949</b>		EXACT TITLE OF YOUR POSITION <b>Admin. Assistant</b>		SALARY OR EARNINGS STARTING: <b>\$2880</b> PER YR. FINAL: <b>\$4100</b> PER YR.	
PLACE OF EMPLOYMENT (City, state) <b>Bombay, India</b>		DESCRIPTION OF YOUR WORK <b>General administrative duties, including preparation of correspondence, administrative reports; handled certain Seaman and Shipping duties; assisted in preparation of pouches and other duties as assigned.</b>			
NAME AND ADDRESS OF EMPLOYER <b>American Consulate General Bombay, India</b>					
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU <b>None</b>					
NAME AND TITLE OF IMMEDIATE SUPERVISOR <b>John J. Macdonald, Consul General</b>					
REASON FOR LEAVING <b>Return to U.S.</b>					
DATES OF EMPLOYMENT (Month, year) FROM: <b>Feb 1944</b> TO: <b>March 1947</b>		EXACT TITLE OF YOUR POSITION <b>Admin. Assistant</b>		SALARY OR EARNINGS STARTING: <b>\$1800</b> PER YR. FINAL: <b>\$2644</b> PER YR.	
PLACE OF EMPLOYMENT (City, state) <b>Washington, DC, India, Ceylon, China</b>		DESCRIPTION OF YOUR WORK <b>Chief Clerk handling personnel actions, files, information reports, administrative correspondence; preparation of pouches; dictation and stenographic duties.</b>			
NAME AND ADDRESS OF EMPLOYER <b>War Department, Washington, D.C.</b>					
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU <b>1-3</b>					
NAME AND TITLE OF IMMEDIATE SUPERVISOR <b>C. Martin Wilbur, Section Chief</b>					
REASON FOR LEAVING <b>To take above position</b>					
DATES OF EMPLOYMENT (Month, year) FROM: <b>Mar 1942</b> TO: <b>October 1943</b>		EXACT TITLE OF YOUR POSITION <b>Senior Stenographer and Jr. Employee Services Officer</b>		SALARY OR EARNINGS STARTING: <b>\$1440</b> PER YR. FINAL: <b>\$2000</b> PER YR.	
PLACE OF EMPLOYMENT (City, state) <b>Washington, DC</b>		DESCRIPTION OF YOUR WORK <b>Employee counselling, aided in case work involving clerical personnel placement problems; stenographic duties, including dictation and transcription of conferences; Maintained accounts for Credit Union, and employee contributions for welfare campaigns.</b>			
NAME AND ADDRESS OF EMPLOYER <b>Executive Office of the President, Office of Emergency Management, Central Personnel and Price Administration</b>					
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU <b>1-3</b>					
NAME AND TITLE OF IMMEDIATE SUPERVISOR <b>Edwin Falter, Personnel Officer</b>					
REASON FOR LEAVING <b>Left DC (temporary illness of parent)</b>					
29. OTHER POSITIONS HELD FOR LESS THAN THREE MONTHS AND PERIODS OF UNEMPLOYMENT. (List—Beginning with most recent)					
DURATION		POSITION	NAME AND ADDRESS OF EMPLOYER OR REASON FOR UNEMPLOYMENT		STARTING AND FINAL SALARY PER ANNUM
Dec 1943	Jan 1944	Personal and Placement Clerk	OWR War Relocation Authority Washington, DC		\$1620. 1620.
Sept 1941	Jan 1942	Photographic Technician (part time while in school)	Elko Photographic Finishing Co. Oklahoma City, Oklahoma		12.50 per wk approx 20.00 per wk
30. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF ANSWER IS "YES" GIVE FULL DETAILS UNDER ITEM #37.					
31a. HAVE YOU NOW OR HAVE YOU EVER HAD ANY PHYSICAL DEFECTS OR DISABILITIES WHATSOEVER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			31b. HAVE YOU EVER BEEN UNDER TREATMENT FOR A MENTAL OR EMOTIONAL DISORDER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
32. WITHIN THE PAST TWELVE MONTHS, HAVE YOU FREQUENTLY USED INTOXICATING BEVERAGES TO EXCESS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			33. HAVE YOU EVER HAD TUBERCULOSIS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
34. WERE YOU EVER MEDICALLY DISCHARGED FROM THE ARMED FORCES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			IF ANY OF YOUR ANSWERS TO ANY OF THE ABOVE IS "YES" GIVE FULL PARTICULARS UNDER ITEM #37. <b>Not applicable</b>		

32. DOES YOUR FINANCIAL POSITION PERMIT DISCHARGE OF ALL DEBT? IN-  
 COMPLETE ☒ YES ☐ NO IF ANSWER IS "NO" STATE UNDER ITEM #37 THE  
 NAMES OF CREDITORS, AMOUNTS DUE TO EACH, AND DATES ON WHICH THE  
 OBLIGATIONS WERE CONTRACTED.

D. IF NOW RESIDING ABROAD HAVE YOU EVER PAID  
 A U.S. INCOME TAX? ☐ YES ☒ NO IF ANSWER  
 IS "YES" GIVE YEAR AND PERCENT OF LAST PAY-  
 MENT. **Not residing in U.S.**

33. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED, OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY POLITICAL  
 PARTY OR ORGANIZATION THAT ADVOCATES THE OVERTHROW OF THE GOVERNMENT OF THE UNITED STATES BY FORCE OR VIOLENCE?  
☐ YES ☒ NO IF ANSWER IS "YES" GIVE FULL DETAILS UNDER ITEM #37.

34. HAVE YOU EVER BEEN ARRESTED OR DETAINED BY CIVIL OR MILITARY AUTHORITIES IN THE UNITED STATES OR IN ANY OTHER  
 COUNTRY (other than for minor traffic violations where the fine did not exceed \$25)? ☐ YES ☒ NO

IF SO, STATE UNDER ITEM #37 THE NAME AND LOCATION OF THE COURT, DATES AND DETAILS OF PROCEEDINGS, AND DISPOSITION.

35. LIST THREE COMPETENT AND RESPONSIBLE PERSONS IN THE UNITED STATES NOT RELATED TO YOU BY BLOOD OR MARRIAGE WHO  
 ARE PARTICULARLY QUALIFIED TO SUPPLY DEFINITE INFORMATION REGARDING YOUR CHARACTER AND ABILITY (do not give names  
 of supervisors listed in answer to questions no. 28 or 29).

NAME	ADDRESS	OCCUPATION
Mr. George H. Greene	1312 29th St. N.W. Wash., DC	U.S. Govt.
Dr. I. R. Howard	1120 Ramblewood Road Baltimore, Maryland	Surgeon
Hubert H. Humphrey	Cornellin Terrace Chevy Chase, Maryland	U.S. Senator

36. MENTION HERE ANY SPECIAL QUALIFICATIONS OR ACHIEVEMENTS NOT COVERED ELSEWHERE IN THIS APPLICATION. INCLUDE SUCH  
 ITEMS AS ANY BOOKS OR ARTICLES YOU HAVE WRITTEN, SPECIAL RESEARCH WORK, TECHNICAL SKILLS, HONORARY OR PROFESSIONAL  
 SOCIETY MEMBERSHIPS, AND ANY OTHER INFORMATION YOU CONSIDER PERTINENT. YOU MAY INCLUDE ANY PERTINENT RELIGIOUS, CIVIC,  
 WELFARE, OR ORGANIZATIONAL ACTIVITY WHICH YOU HAVE PERFORMED EITHER WITH OR WITHOUT COMPENSATION, SHOWING THE NUM-  
 BER OF HOURS PER WEEK AND NUMBER OF WEEKS PER YEAR IN WHICH YOU WERE ENGAGED IN SUCH ACTIVITY.

37. USE THIS SPACE FOR COMPLETING ANSWERS TO ANY OF THE FOREGOING QUESTIONS, NUMBERING ANSWERS TO CORRESPOND WITH  
 QUESTIONS. USE EXTRA SHEETS OF PAPER IF NECESSARY.

23. In October 1945 transferred by Executive order to Department of State, IRIS/  
 Kunning, China; however, transfer cancelled in December 1945 and remained  
 with War Department, Shanghai.

28. Under present position am included in the provisions of the U.S. Retirement  
 Act.

#### CERTIFICATION

False Statement on this Application is Cause for Dismissal.

I DO SOLEMNLY AFFIRM THAT THE INFORMATION CONTAINED HEREIN IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

DATE

NAME AS USUALLY WRITTEN AND WHERE IT WILL BE USED AS OFFICIAL SIGNATURE



# APPLICATION FOR FEDERAL EMPLOYMENT

INSTRUCTIONS: This application must be filled out in INK. It is for use by persons who are applying for examination and appointment for Federal employment. It is to be filled out by the applicant and submitted to the Civil Service Commission. It is to be filled out by the applicant and submitted to the Civil Service Commission. It is to be filled out by the applicant and submitted to the Civil Service Commission.

1. Name of applicant or kind of position applied for

2. Criminal record (if mentioned in examination announcement)

3. Name of employer applied for

4. Sex ☒ Male ☐ Female ☐ Other (specify) \_\_\_\_\_

5. Street and number or R. F. number

6. City or post office (including postal zone), and State

7. Office phone No. Home phone

8. Place of birth (city and State, if born outside U. S., name city and country)

9. Date of birth (month, day, year)

10. Age last birthday

11. ☐ Male ☒ Female

12. ☐ Married ☐ Single ☐ Widowed ☐ Divorced

13. Height without shoes

14. Weight

15. Have you ever been employed by the Federal Government? ☒ Yes ☐ No

If now employed by the Federal Government, give present grade and date of last change in grade

temp GAE-9 Dec 14, 1947

## DO NOT WRITE IN THIS BLOCK For Use of Civil Service Commission Only

☐ Appon. ☐ Material ☐ Examinee requires

☐ Submitted ☐ Returned

Notations

App. Review

Received

OPTION	GRADE	FAVORABLE RATING	UNFAVORABLE RATING	AUGMENTED RATING
		<input type="checkbox"/> 5 points (none)	<input type="checkbox"/> 10 points	<input type="checkbox"/> Write or Waive
		<input type="checkbox"/> 15 points	<input type="checkbox"/> 20 points	<input type="checkbox"/> Disqual
		<input type="checkbox"/> 25 points	<input type="checkbox"/> 30 points	<input type="checkbox"/> Being re-evaluated

INITIALS AND DATE

Indicate "Yes" or "No" answer to queries X in proper column

	YES	NO
13. (a) Would you accept short-term appointment, if offered for—	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1 to 3 months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3 to 6 months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6 to 12 months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(b) Would you accept appointment, if offered—	<input checked="" type="checkbox"/>	<input type="checkbox"/>
in Washington, D. C.?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
anywhere in the United States?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
outside the United States?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

13. (c) If you will accept appointment in certain locations ONLY, give acceptable locations

(a) What is the lowest entrance salary you will accept? \$ \_\_\_\_\_ per year.

You will not be considered for positions paying less.

(b) If you are willing to travel, specify:

☒ Locally ☒ Frequently ☐ Occasionally

14. EXPERIENCE—You are requested to furnish all information asked for below in sufficient detail to enable the Civil Service Commission and the appointing officers of agencies to determine your qualifications for the position for which you are applying. If the space provided below describes EVERY position you have held, use a separate sheet for EACH position. You may also include any pertinent religious, civic, and/or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Start with your PRESENT position and work back, commencing by six periods of six months each. Indicate clearly the principal tasks which you performed in each position. Describe your experience in the Armed Services in case of (1) Military Experience.

(a) If you were ever employed in any position under a name different from that shown in Item 4 of this application, give under "Description of your work" for each position, the name used.

(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

**PRESENT POSITION**

Date of employment (Month, year)	Exact title of your present position	Salary or earnings
From: <u>November 1946</u> To present time	<u>Administrative Assistant</u>	Starting \$ _____ per
Place of employment (city and State)		Present \$ _____ per
<u>Elmwood, India</u>		
Name and address of employer (firm, organization, or person)	Description of your work	
If Federal, name department, bureau or establishment, and division	<u>General administrative and routine consular duties.</u>	
<u>American Consulate General</u>		
Kind of business or organization (e. g., all useful, all insurance agency, etc.)		
<u>U. S. Foreign Service</u>		
Number and kind of employees supervised (if any)		
<u>none</u>		
Name and title of immediate supervisor		
<u>Lennox C. Fogg, Vice Consul</u>		
Reason for desiring to change employment		
<u>Return to U. S.</u>		

16 CONTINUED

From <u>June 46</u> To <u>Nov 46</u> Place of employment (city and state): <b>Washington, D.C.</b> Name and address of employer (firm, organization, or person): If Federal name department, bureau or establishment, and division: <b>SSU-CIG Registry</b> Kind of business or organization (e. g., wholesale mkt., insurance agency, etc. of locks, etc.): <b>US GOVT</b> Number and kind of employees supervised by you: - Name and title of immediate supervisor: <b>Mrs. C. Gilbert, Chief, Registry</b> Reason for leaving: <b>transfer</b>		Exact title of past position: <b>Reference Clerk</b> Description of your work: <b>General reference, indexing of classified documents on far east.</b> Salary or earnings: Starting \$ <u>per</u> Final \$ <u>2770</u> <u>per yr</u>	
From <u>October 45</u> To <u>May 46</u> Place of employment (city and state): <b>Shanghai, China</b> Name and address of employer (firm, organization, or person): If Federal name department, bureau or establishment, and division: <b>INIS-SSU</b> Kind of business or organization (e. g., wholesale mkt., insurance agency, etc. of locks, etc.): <b>US GOVT</b> Number and kind of employees supervised by you: - Name and title of immediate supervisor: <b>C. H. Wilbur, Chief, INIS and Col. R. J. Delaney</b> Reason for leaving: <b>Transfer</b>		Exact title of past position: <b>Reference Clerk</b> Description of your work: <b>Clerk, general administrative assistant, and secretary for Chief, INIS, China and reference clerk for OB of SSU, China</b> Salary or earnings: Starting \$ <u>per</u> Final \$ <u>2560</u> <u>per yr</u>	
From <u>February 44</u> To <u>September 45</u> Place of employment (city and state): <b>Washington, D.C.</b> <b>New Delhi, India, Ceylon &amp; Kunming, China</b> Name and address of employer (firm, organization, or person): If Federal name department, bureau or establishment, and division: <b>OSS-S&amp;A-CBI</b> Kind of business or organization (e. g., wholesale mkt., insurance agency, etc. of locks, etc.): <b>US GOVT</b> Number and kind of employees supervised by you: - Name and title of immediate supervisor: <b>Geo. Greene, Cora DuBois &amp; Col. Joseph Spencer</b> Reason for leaving: <b>Chiefs of R&amp;A</b> <b>Transfer</b>		Exact title of past position: <b>Clerk and Stenographer</b> Description of your work: <b>Secretary, clerk, stenographer, and general administrative assistant for East Asia Economics section in D.C. and R&amp;A branch in field.</b> Salary or earnings: Starting \$ <u>per</u> Final \$ <u>2560</u> <u>per yr</u>	
From <u>11 Mar 42</u> To <u>February 44</u> Place of employment (city and state): <b>Washington, D.C.</b> Name and address of employer (firm, organization, or person): If Federal name department, bureau or establishment, and division: <b>CEM-Price Admin. &amp; WRA Personnel</b> Kind of business or organization (e. g., wholesale mkt., insurance agency, etc. of locks, etc.): <b>US GOVT</b> Number and kind of employees supervised by you: - Name and title of immediate supervisor: <b>R.C. Prosky, Chief, Employee Services Section</b> Reason for leaving: <b>Transfer</b>		Exact title of past position: <b>Jr. Employee Services Officer</b> Description of your work: <b>&amp; Personnel Clerk 1620</b> <b>General employee services functions for Personnel Division, CEM-Price Admin. General personnel clerk for WRA (OEM)</b> Salary or earnings: Starting \$ <u>per</u> Final \$ <u>2000</u> <u>per</u>	

If more space is required, use a continuation sheet (GSA Form No. 50) or a sheet of paper the same size as in a part II. Write on each sheet your name, address, date of birth, and classification title. Attach to inside of this application.

Prior employment during page not applicable

00000

QUALIFICATIONS & EXPERIENCE

12 Nov. 1946

NAME: Ann Lorene GOODPASTURE

PERSONAL: Date of Birth - 20 November 1918  
Place of Birth - Celina, Tennessee  
Legal Residence - Oklahoma

PARENTAGE: Father: C. H. Goodpasture, Born 12 February 1894,  
Citizenship - U.S. by Birth  
Mother: Anna W. Goodpasture, Born 21 February 1891  
Citizenship - U.S. by Birth

EDUCATION: 1928-30 Grammar School - Tennessee & Oklahoma  
1930-32 Ward Jr. High School, Tipton, Oklahoma  
1932-36 Tipton Sr. High School, Tipton, Oklahoma  
1937-41 University of Oklahoma, Norman, Oklahoma BS 1941  
9/41 - 2/42 Hill's University, Oklahoma City. Special courses  
no degree conferred

EXPERIENCE: 1937-41 - University of Oklahoma. Secretarial & clerical duties -  
part-time while attending school \$20-30 month  
9/1941-2/1942 - Elko Photographic Finishing Co., Oklahoma City.  
Secretary and Photographic technician - part-time while  
in school. \$60-85. month  
3/1942-1/1944 - Office for Emergency Management, Central Personnel  
and Price Administration. Steno & Jr. Employee Services  
Officer. \$1440-2000. yr  
2/1944-Present - Office of Strategic Services. Far East Division,  
RAA Branch. Secretary to Chief, East Asia Economics  
Section to Nov. 44, Washington, DC. \$1800. yr

New Delhi, India; Kandy, Ceylon; Kunning, China  
Secretary & Chief Clerk to Chief, OSS/RAA, IB and China  
Theaters to Oct. 1945 \$2000-2300 yr

Kunning, China; Shanghai, China  
Secretary & Chief Clerk to Chief, IRIS/CT, Dept. of State  
to December 1945. \$2320. yr

Shanghai, China; Washington, DC  
AD, OASW, SSU. Reference Clerk, Order of Battle Section,  
SI, Shanghai and Registry, SI, Washington. \$2320-2770 yr.

LANGUAGES: French, Speak, Write, Read fair

TRAVEL: Nov. 1944-Sept. 1945, India & Ceylon (2 months temporary duty in  
Ceylon - Jun, July 1945).  
Sept. 1945 - March 1946, China

(a) First Army Service School attended: Location: Dates attended (month, years): From: To: Rating received at end of this training:		(b) Where were you brought in first day of service (initial):																												
(c) Duty assignment or rating after this training (give all important changes in duty assignment whether or not you attended a Service School): Dates of duty assignment (month, years): From: To:		(d) What did you do during this duty assignment?																												
(e) Second Special Service School attended: Location: Dates attended (month, years): From: To: Rating received at end of this training:		(f) Where were you brought in second day of service (initial):																												
(g) Duty assignment after this training: Dates of duty assignment (month, years): From: To:		(h) What did you do during this duty assignment?																												
List on a separate sheet of paper any additional experience, training, service, or special duty assignments during military service or hospitalization.																														
18. EDUCATION - Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 Mark (a) the appropriate box to indicate satisfactory completion: <input type="checkbox"/> Elementary School <input type="checkbox"/> Junior High School <input checked="" type="checkbox"/> Senior High School		(a) Give name and location of last high school attended: <b>Tipton, Okla. Tipton High School</b> (b) Subjects studied in high school which apply to post (if checked): <b>No specialized curriculum</b>																												
(c) Name and Location of College or University <b>University of Oklahoma, Norman English Hills' University, Okla. City Bus Ad.</b>		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Dates Attended</th> <th colspan="2">Years Completed</th> <th colspan="2">Degrees Conferred</th> <th rowspan="2">Semester Hours Credit</th> </tr> <tr> <th>From—</th> <th>To—</th> <th>Day</th> <th>Night</th> <th>Title</th> <th>Date</th> </tr> </thead> <tbody> <tr> <td>1937</td> <td>1941</td> <td>x 4</td> <td></td> <td>B.S.</td> <td>1941</td> <td>127</td> </tr> <tr> <td>9/41</td> <td>2/12</td> <td>1</td> <td>2</td> <td>-</td> <td>-</td> <td></td> </tr> </tbody> </table>		Dates Attended		Years Completed		Degrees Conferred		Semester Hours Credit	From—	To—	Day	Night	Title	Date	1937	1941	x 4		B.S.	1941	127	9/41	2/12	1	2	-	-	
Dates Attended		Years Completed		Degrees Conferred		Semester Hours Credit																								
From—	To—	Day	Night	Title	Date																									
1937	1941	x 4		B.S.	1941	127																								
9/41	2/12	1	2	-	-																									
(d) List Your Chief Undergraduate College Subjects: <b>English 16-20</b> <b>Commercial Arts 50</b> <b>Education 24</b>		List Your Chief Graduate College Subjects: <b>Bus. Ad. &amp; Stenotypy</b>																												
(e) Other training, such as vocational, business, study courses given through the Armed Forces Institute (show name and location of school, or "in-service training" in a Federal agency). <b>none</b>		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Subjects Studied</th> <th colspan="2">Dates Attended</th> <th colspan="2">Years Completed</th> </tr> <tr> <th>From—</th> <th>To—</th> <th>Day</th> <th>Night</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		Subjects Studied	Dates Attended		Years Completed		From—	To—	Day	Night																		
Subjects Studied	Dates Attended		Years Completed																											
	From—	To—	Day	Night																										
19. Indicate your knowledge of foreign languages: <b>French</b>		21. Are you now or have you ever been a licensee or certificate holder of any trade or profession (such as pilot, electrician, radio operator, stenographer, lawyer, CPA, etc.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Give kind of license and State: <b>Teacher</b> First license or certificate (year): <b>Life certificate obtained 1941</b> (Initial license or certificate (year):																												
(a) How was your knowledge of foreign languages acquired? <b>Formal instruction</b>		22. Give any special qualifications not covered elsewhere in your application such as: (a) for your most important publications (do NOT add unit courses unless requested) (b) for your patents or inventions (c) public speaking and public relations experience (d) team work in professional or scientific societies, etc.																												
(b) If you have traveled or resided in any foreign countries, indicate (1) names of countries, (2) dates and length of time spent there and (3) reason or purpose (e. g., business, education, recreation). <b>See experience. Oct 48 - 6 Dec 48 travelled to US via Europe stopping all countries enroute - purpose: visit.</b>		20. List any special skills you possess and machines and equipment you can use, such as operation of short-wave radio, multi-line typewriter, key-punch, turret lathe, scientific or professional devices: Approximate number of words per minute in typing: <b>2</b> shorthand: <b>2</b>																												

[illegible]

# APPLICATION FOR FEDERAL EMPLOYMENT

**INSTRUCTIONS** - Answer every question fully and completely. Type or print in INK. If you are applying for appointment, read the explanation, announcement, and instructions. Mail this application to the office indicated in the announcement. Be sure to mail to the same office any other forms required by the announcement. Notify the office with which you file this application of any change in your address.

1. Name of examination, or kind of position applied for:

2. Optional subject (if mentioned in examination announcement):

3. Place of employment applied for:

4. **ANN LORENE GOODPASTURE**  
(First name) (Maiden, if any) (Last)

5. Street and number or R. D. number:  
**1514 - 17th St., N. W., Apt. 111**  
City or post office (including postal zone), and State:  
**Washington, D. C.**

6. Local or visiting residence (State) Office phone No. Home phone  
**OKLAHOMA Ext. 2215 Ext. 111**

7. Place of birth (city and State, if born outside U. S., name city and country)  
**CELINA, TENNESSEE**

8. Date of birth (month, day, year):  
**28 NOV 1918**

9. Age (last birthday):  
**27**

10. ☐ Male ☒ Female

11. ☐ Married ☒ Single

12. Height without shoes: **5** feet **2** inches Weight: **115** pounds

13. Have you ever been employed by the Federal Government? ☒ Yes ☐ No  
If now employed by the Federal Government, give present grade and date of last change in grade.  
**CAF-5, 1 March 1945**

## DO NOT WRITE IN THIS BLOCK For Use of Civil Service Commission Only

☐ Appor. ☐ Material ☐ Entered register:  
☐ Non-appe. ☐ Submitted ☐ Returned

Notations: App. Review:

Approved:

OPTION	GRADE	EARNED RATING	PREFERENCE	ALTERN. RATING
			<input type="checkbox"/> 5 points (best)	
			<input type="checkbox"/> 10 points	
			<input type="checkbox"/> Wife or Widow	
			<input type="checkbox"/> Dead	
			<input type="checkbox"/> Being investigated	

INITIALS AND DATE

Indicate "Yes" or "No" answer by placing "X" in proper column

	YES	NO
18. (a) Would you accept short-term appointment if offered for—		
1 to 3 months?		
3 to 6 months?		
6 to 12 months?	<input checked="" type="checkbox"/>	
(b) Would you accept appointment if offered—	<input checked="" type="checkbox"/>	
in Washington, D. C.?		
anywhere in the United States?	<input checked="" type="checkbox"/>	
outside the United States?	<input checked="" type="checkbox"/>	

19. (c) If you will accept appointment in certain locations ONLY, give acceptable locations.

(d) What is the lowest entrance salary you will accept: \$ \_\_\_\_\_ per year.  
You will not be considered for positions paying less.

(e) If you are willing to travel, specify:  
☒ Occasionally ☒ Frequently ☒ Continually

18. **EXPERIENCE**—You are requested to furnish all information asked for below in sufficient detail to enable the Civil Service Commission and the appointing officers of agencies to determine your qualifications for the position for which you are applying. In the spaces provided below describe EVERY position you have held. Use a separate block for EACH position. You may also include any pertinent rule, rule, rule, or organizational activity which you have performed either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activity. Start with your PRESENT position and work back, accounting for all periods of unemployment. Explain clearly the principal tasks which you performed in each position. Describe your experience in the Armed Services in question 17. (Military Experience).

(a) If you were ever employed in any position under a name different from that shown in item 4 of this application, give under "Description of your work" for each position the name used.

(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."

**PRESENT POSITION**

Date of employment (Month, year): From: <b>May 1946</b> To present time	Exact title of your present position: <b>Reference Clerk</b>	Salary or earnings: Starting \$ _____ per _____ Present \$ <b>2770</b> per annum
Place of employment (city and State): <b>Washington, D. C.</b>	Description of your work: <b>Indexing and logging incoming classified reports on Far East. Processing obsolete and outdated field and Hqtrs document files.</b>	
Name and address of employer (firm, organization, or person): If Federal, name department, bureau or establishment, and division: <b>WD, OSAN, SSU, Registry</b>		
Kind of business or organization (e. g., wholesale and insurance agency, etc.): <b>U. S. Government</b>		
Number and kind of employees supervised by you: <b>1 - Reference clerk</b>		
Name and title of immediate supervisor: <b>Mrs. C. J. Gilbert, Actg. Chief.</b>		
Reason for desiring to change employment: <b>Liquidation of Agency</b>		

(CONTINUED ON NEXT PAGE)

10 CONTINUED

Dates of employment (Month, year) <b>Dec 45</b> <b>April 48</b>		Exact title of your position <b>Secretary - Research Assistant</b>		Salary or emoluments Starting \$ <b>2320</b> per Final \$ <b>2430</b> per annum
Place of employment (city and State) <b>Shanghai, China</b>		Description of your work <b>Secretarial duties, assisted in composing classified Order of Battle reports. Set-up biographical file of military personalities. Spotted troop movements on situation maps.</b>		
Name and address of employer (firm, organization, or person) If Federal, name department, bureau or establishment, and division <b>War Dept, OASW, Hq. SSU/CT</b>				
Kind of business or organization (e.g., wholesale, retail, insurance agency, city of locks, etc.) <b>U.S. Government</b>				
Number and kind of employees supervised by you <b>1 - 3</b>				
Name and title of immediate supervisor <b>Capt. Wayne Richardson, Chief</b> <b>Lt. Col. R.J. Delaney, CO</b>				
Reason for leaving <b>Deactivation of SSU/CT</b>				
Dates of employment (Month, year) <b>Sept 45</b> <b>Dec 45</b>		Exact title of your position <b>Secretary and Chief Clerk</b>		Salary or emoluments Starting \$ <b>2320</b> per Final \$ <b>2320</b> per annum
Place of employment (city and State) <b>Kunming and Shanghai, China</b>		Description of your work <b>Responsible for secretarial and general administrative duties for RAA Branch - after 1 Oct 45; IRIS/State Dept. Separate Registry and document library. Allocation of typing and clerical duties to EM clerks &amp; typists. Reproduction of RAA analytical reports and dissemination to State Dept. Washington and appropriate Consulates. Prepared periodic reports to State, Washington; Consulate-General, Shanghai; and SSU/CT. Requisitioning and accountability for expendable &amp; non-expendable property for IRIS.</b>		
Name and address of employer (firm, organization, or person) If Federal, name department, bureau or establishment, and division <b>State Dept./IRIS/CT</b>				
Kind of business or organization (e.g., wholesale, retail, insurance agency, city of locks, etc.) <b>U.S. Government</b>				
Number and kind of employees supervised by you <b>1 - 3 EM clerks &amp; typists</b>				
Name and title of immediate supervisor <b>Lt. Col. J.E. Spencer, Chief/RAA</b> <b>Mr. C.M. Wilbur, Chief, IRIS/CT</b>				
Reason for leaving <b>Deactivation of IRIS/CT. Transfer to SSU.</b>				
Dates of employment (Month, year) <b>Dec 44</b> <b>Sept. 45</b>		Exact title of your position <b>Secretary and Chief Clerk</b>		Salary or emoluments Starting \$ <b>2000</b> per Final \$ <b>2320</b> per annum
Place of employment (city and State) <b>New Delhi, India &amp; Kandy, Ceylon</b>		Description of your work <b>Duties same as above except RAA was under jurisdiction of OSS rather than Dept. of State (2 months temporary duty in Ceylon, June - July, 1945; Immediate supervisor: Major Cera, DuBois)</b>		
Name and address of employer (firm, organization, or person) If Federal, name department, bureau or establishment, and division <b>OSS - RAA Branch - IF Theater</b>				
Kind of business or organization (e.g., wholesale, retail, insurance agency, city of locks, etc.) <b>U.S. Government</b>				
Number and kind of employees supervised by you <b>1 - 3 clerks and typists</b>				
Name and title of immediate supervisor <b>Capt. J. R. Coolidge, Chief, RAA/IF</b>				
Reason for leaving <b>Transfer requested by China Theater.</b>				
Dates of employment (Month, year) <b>Feb 44</b> <b>Dec 44</b>		Exact title of your position <b>Secretary to Section Chief</b>		Salary or emoluments Starting \$ <b>1800</b> per Final \$ <b>1800</b> per
Place of employment (city and State) <b>Washington, D. C.</b>		Description of your work <b>Responsible for performance and allocation of all secretarial and clerical duties pertaining to work of East Asia Economics Section. Responsible for files, correspondence, periodic reports, etc.</b>		
Name and address of employer (firm, organization, or person) If Federal, name department, bureau or establishment, and division <b>OSS-RAA - East Asia Economics Sect.</b>				
Kind of business or organization (e.g., wholesale, retail, insurance agency, city of locks, etc.) <b>U. S. Government</b>				
Number and kind of employees supervised by you <b>1 Clerk typist</b>				
Name and title of immediate supervisor <b>G.H. Greene, Jr., Section Chief</b>				
Reason for leaving <b>Transfer to Far East.</b>				

If more space is required, use a continuation of Standard Form No. 58 or a sheet of paper the same size as both, and connective title. Attach to main document.

Write on each sheet your name, address, date of birth, and connecting title. Attach to main document.

16-47200-1

# CONTINUATION SHEET

Form approved  
Revised Bureau No. 50-RV8

For Question 16, "Application for Federal Employment," Standard Form No. 57

Fill in this form only when necessary for completion of Question 16, "Experience," on Standard Form No. 57. Submit unattached, with your application. Type or write legibly in ink.				1. Date of this continuation sheet	
2. Name (First name)	(Middle)	(Maiden, if any)	(Last)	3. Date of birth	4. Name of examination
ANN	LOUISE	GOODPASTURE		28 Nov. 1918	

Dates of employment (Month, year) From: <b>March 1942</b> To: <b>Jan 1944</b> Place of employment (city and State): <b>Washington, D. C.</b> Name and address of employer (firm, organization, or person): If Federal, name department, bureau or establishment, and division: <b>OFFICE FOR EMERGENCY MANAGEMENT</b> Kind of business or organization (e. g., wholesale silk, insurance agency, etc.): <b>Government</b> Number and kind of employees supervised by you: <b>1 CAF-3</b> Name and title of immediate supervisor: <b>Proby, Wm CAF31 Chief/Employee Services.</b> Reason for leaving: <b>Transfer</b>		Exact title of your position: <b>Jr. Employee Services Officer</b> Salary or wage rate: Starting: \$ <b>1440</b> per annum Final: \$ <b>2000</b> per annum Description of your work: <b>Began as Clk-atone in Central Personnel/CEM. Various stenographic and clerical duties. Transferred to Price Administration to assist in setting up Employee Services program under Employee Relations Division. Dec 43 - Jan 44 was Placement and Training Clerk for War Relocation Authority (Also originally under CEM).</b>	
Dates of employment (Month, year) From: <b>Sept 41</b> To: <b>Feb 42</b> Place of employment (city and State): <b>Oklahoma City, Oklahoma</b> Name and address of employer (firm, organization, or person): If Federal, name department, bureau or establishment, and division: <b>ELKO PHOTOGRAPHIC FINISHING CO.</b> Kind of business or organization (e. g., wholesale silk, insurance agency, etc.): <b>Commercial</b> <b>Photographic Finishing</b> Number and kind of employees supervised by you: <b>1 to 15 unskilled technicians</b> Name and title of immediate supervisor: <b>Mr. Gee, Dempsey, Gen'l Mgr.</b> Reason for leaving: <b>Full time employment in D.C.</b>		Exact title of your position: <b>Secretary &amp; Photographic Technician</b> Salary or wage rate: Starting: \$ <b>50</b> per mo. Final: \$ <b>85</b> per mo. Description of your work: <b>Part-time employment at company while attending school.</b>	
Dates of employment (Month, year) From: <b>1937</b> To: <b>June 41</b> Place of employment (city and State): <b>Norman, Oklahoma</b> Name and address of employer (firm, organization, or person): If Federal, name department, bureau or establishment, and division: <b>University of Oklahoma</b> Kind of business or organization (e. g., wholesale silk, insurance agency, etc.): <b>University</b> Number and kind of employees supervised by you: <b>None</b> Name and title of immediate supervisor: <b>Mrs. Peters, Dean, FA.</b> Reason for leaving: <b>End of school</b>		Exact title of your position: <b>Secretary - clerk</b> Salary or wage rate: Starting: \$ <b>20</b> per mo. Final: \$ <b>30</b> per mo. Description of your work: <b>On University pay-roll while attending University. Part-time employment in offices of Faculty members, library and University Press.</b>	



**17. MILITARY EXPERIENCE** - In order to make proper placement of war veterans, detailed information should be furnished in the Armed Services - All in the service; write in Item (a) "No" at service schools" and indicate in Item (c) all changes in duty assignment, showing dates of such assignment.

(a) First Special Service School attended:		(b) What were you taught in First Special Service School?	
Location:			
Dates attended (months, years):			
From: To:			
Rating received at end of this training:			
(c) Duty assignment or rating after this training (give all important changes in duty assignment whether or not you attended a Service School):		(d) What did you do during this duty assignment?	
Dates of duty assignment (months, years):			
From: To:			
(e) Second Special Service School attended:		(f) What were you taught in Second Special Service School?	
Location:			
Dates attended (months, years):			
From: To:			
Rating received at end of this training:			
(g) Duty assignment after this training:		(h) What did you do during this duty assignment?	
Dates of duty assignment (months, years):			
From: To:			

List on a separate sheet of paper any additional experience, training, service, or special duty assignments during military service or hospitalization.

**18. EDUCATION** - Circle highest grade completed.  
 1 2 3 4 5 6 7 8 9 10 11 12 / 13  
 Mark (x) the appropriate box to indicate satisfactory completion of:  
☐ Elementary School ☐ Junior High School ☒ Senior High School

(c) Name and Location of College or University		Major	Dates Attended		Years Completed		Degrees Conferred		Semester Hours Credit
			From—	To—	Day	Night	Title	Date	
University of Oklahoma, Norman		Arts & Science	1937	1941	4		B.S.	June 41	127
Hills University, Okla. City		Business	9/41	2/42	2				
(d) List Your Chief Undergraduate College Subjects		Semester Hours	List Your Chief Graduate College Subjects						Semester Hours
Arts & Sciences (Commercial)		50	Business Administration						
English		20	Typing - Secretarial Science						
Education		24							
History		12							

(e) Other training such as vocational business study courses given through the Armed Forces Institute (show name and location of school), or "in-service training" in a Federal agency:

Subjects Studied	Dates Attended		Years Completed	
	From—	To—	Day	Night

19. Indicate your knowledge of foreign languages	READING			SPEAKING			UNDERSTANDING		
	Exp	Good	Prof	Exp	Good	Prof	Exp	Good	Prof
French			X			X			X

(a) How was your knowledge of foreign language acquired?  
 School  
 (b) If you have traveled or resided in any foreign countries, indicate (1) names of countries, (2) dates and length of time spent there and (3) reason or purpose (e. g., business, education, recreation):  
 Given in Item 16 this application

20. List any special skills you possess and machines and equipment you can use, such as operation of short-wave radio, marliner, computer, key-punch, turret lathe, scientific or professional devices:  
 Typewriter, duplicating machines, stenotype  
 Approximate number of words per minute in typewriting: 60, shorthand: 100

21. Are you now or have you ever been a licensed or certified member of any trade or profession (such as pilot, electrician, radio operator, teacher, lawyer, CPA, etc.)?  
☒ Yes ☐ No Give kind of license and State: Teacher  
 First license or certificate (year): 1941 (Life)  
 Latest license or certificate (year):

22. Give any special qualifications not covered elsewhere in your application such as:  
 (a) your more important publications (do NOT submit copies unless requested)  
 (b) your patents or inventions  
 (c) public speaking and public relations experience  
 (d) membership in professional or scientific societies, etc.

<b>23. REFERENCES</b> —List three persons living in the United States or Territories of the United States who are well known to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Do not repeat names of supervisors shown under Item 16 (EM ENCL. 2).																																													
FULL NAME	BUSINESS OR HOME ADDRESS (Give complete address, including street and number)	BUSINESS OR OCCUPATION																																											
1. <b>MR. EDWARD SAUNDERS</b>	<b>2430 E St., N.W., Washington, D.C.</b> Telephone EX 6115, ext. 445	<b>Government</b>																																											
2. <b>MISS OLIVE REDDICK</b>	<b>Heed College, Frederick, Md.</b>	<b>Professor</b>																																											
3. <b>MISS ABEA BLUE</b>	<b>23rd and E Sts., N.W., Washington DC</b> <b>State Department/CRI</b>	<b>Government</b>																																											
<b>24. May inquiry be made of your present employer regarding your character, qualifications, etc?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																													
Indicate "Yes" or "No" answer by placing X in proper column.	YES	NO	Indicate "Yes" or "No" answer by placing X in proper column.	YES	NO																																								
<b>25. Are you a citizen of the United States?</b>	<input checked="" type="checkbox"/>		<b>26. Have you any physical defect or disability whatsoever?</b> If your answer is "Yes," give complete details in Item 36.		<input checked="" type="checkbox"/>																																								
<b>26. Do you advocate or have you ever advocated, or are you now or have you ever been a member of any organization that advocates the overthrow of the Government of the United States by force or violence?</b> If your answer is "Yes," give complete details in Item 36.	<input checked="" type="checkbox"/>		<b>26. (a) Were you ever in the United States Military or Naval Service during time of War?</b>		<input checked="" type="checkbox"/>																																								
<b>27. Within the past 12 months, have you habitually used intoxicating beverages to excess?</b>	<input checked="" type="checkbox"/>		<b>(b) Is the word "honorable" on the word "satisfactory" used in your discharge or separation papers to show the type of your discharge or separation?</b>																																										
<b>28. Since your 16th birthday, have you ever been convicted, or fined, or imprisoned, or placed on probation, or have you ever been ordered to deposit bail, for the violation of any law, police regulation or ordinance (including minor traffic violations for which a fine of \$25 or less was imposed)?</b> If your answer is "Yes," list all such cases under Item 38 below. Give in each case (1) the date, (2) the nature of the offense or violation, (3) the name and location of the court, (4) the penalty imposed, if any, or other disposition of the case. If appointed your fingerprints will be taken.	<input checked="" type="checkbox"/>		<b>(c) Was service performed on an active full-time basis, with full military pay and allowances?</b>																																										
<b>29. Have you ever been discharged or forced to resign for misconduct or unsatisfactory service from any position?</b> If your answer is "Yes," give in Item 38 the name and address of employer, date, and reason in each case.	<input checked="" type="checkbox"/>		<b>(d)</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Date of entry or entry into service</td> <td style="width: 50%;">Date of separation or separations</td> </tr> <tr> <td style="height: 40px;"></td> <td style="height: 40px;"></td> </tr> <tr> <td>Branch (Army, Navy, etc.)</td> <td>Serial No. (If none, give grade or rating at time of separation)</td> </tr> </table>		Date of entry or entry into service	Date of separation or separations			Branch (Army, Navy, etc.)	Serial No. (If none, give grade or rating at time of separation)																																		
Date of entry or entry into service	Date of separation or separations																																												
Branch (Army, Navy, etc.)	Serial No. (If none, give grade or rating at time of separation)																																												
<b>30. Do you receive an annuity from the U. S. or D. C. Government under any retirement act or any pension or other compensation for military or naval service?</b> If your answer is "Yes," give in Item 38 reason for retirement, that is, age, optional, disability, or by reason of voluntary or involuntary separation after 5 years' service, amount of retirement pay, and under what retirement act, and rating if received from military or naval service.	<input checked="" type="checkbox"/>		<b>IF YOUR ANSWERS TO THIS QUESTION (No. 36) INDICATE THAT YOU ARE ENTITLED TO VETERAN PREFERENCE, SUCH PREFERENCE WILL BE GRANTED IN THE EXAMINATION. IF APPOINTED, YOU WILL BE REQUIRED TO FURNISH TO THE APPOINTING OFFICE, PRIOR TO ENTRY ON DUTY, OFFICIAL EVIDENCE OF SEPARATION FROM YOUR LATEST PERIOD OF ACTIVE SERVICE IN THE ARMED FORCES OF THE UNITED STATES DURING TIME OF WAR. DO NOT SUBMIT PROOF OF DISCHARGE OR SEPARATION WITH THIS APPLICATION.</b>																																										
<b>31. Are you an official or employee of any State, Territory, county, or municipality?</b> If your answer is "Yes," give details in Item 38.	<input checked="" type="checkbox"/>		Indicate "Yes" or "No" answer by placing X in proper column.	YES	NO																																								
<b>32. Does the U. S. Government employ in a civil capacity any relative of yours (by blood or marriage) with whom you live or have lived within the past 6 months?</b> If your answer is "Yes," show in Item 38 for EACH such relative (1) full name, (2) present address, (3) relationship, (4) department or agency by whom employed, and (5) kind of appointment.	<input checked="" type="checkbox"/>		<b>37. (a) If you served in the U. S. Military or Naval Service during peacetime ONLY, did you participate in a campaign or expedition and receive a campaign badge or service ribbon?</b>																																										
<b>33. Have you ever had a nervous breakdown?</b> If your answer is "Yes," give complete details in Item 38.	<input checked="" type="checkbox"/>		<b>(b) Are you a disabled veteran?</b>		<input checked="" type="checkbox"/>																																								
<b>34. Have you ever had tuberculosis?</b> If your answer is "Yes," give complete details in Item 38.	<input checked="" type="checkbox"/>		<b>(c) Are you the unmarried widow of a veteran?</b>		<input checked="" type="checkbox"/>																																								
<b>38. Space for detailed answers to other questions indicate item numbers to which answers apply.</b>			<b>IF YOUR ANSWER TO QUESTION 37 (a) (1), (b), OR (c) IS "YES" AND YOU WISH TO CLAIM VETERAN PREFERENCE, ATTACH TO THIS APPLICATION VETERAN PREFERENCE CLAIM WITH SERVICE COMMISSION FORM 141 TOGETHER WITH THE NECESSARY PROOF SPECIFIED THEREIN.</b>																																										
<b>38. Space for detailed answers to other questions indicate item numbers to which answers apply.</b>			<b>THIS SPACE FOR USE OF APPOINTING OFFICE ONLY</b> The information contained in the answers to Question 36 above has been verified by comparison with the discharge certificate on _____ 19____ Agency _____ Title _____																																										
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">ITEM No.</th> <th style="width: 90%;"></th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	ITEM No.																						<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">ITEM No.</th> <th style="width: 90%;"></th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>	ITEM No.																					
ITEM No.																																													
ITEM No.																																													
If more space is required, use paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to back of this application.																																													
<b>FALSE STATEMENT ON THIS APPLICATION IS PUNISHABLE BY LAW (U. S. CODE TITLE 18, SECTION 81).</b> I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.																																													
Date _____		Signature of applicant _____ (Sign your name in ink (one given name, middle and surname). If female, prefix Miss or Mrs. and if married use your own given name.)																																											

Standard Form No. 57  
Revised April 9, 1942  
Issued July 1942  
U. S. CIVIL SERVICE COMMISSION  
S. C. Form 57-103-332

# APPLICATION FOR FEDERAL EMPLOYMENT

**INSTRUCTIONS**—Answer every question fully and completely. Type name or write legibly in BLACK INK. To assure clear photographic copies for appointing service. If you are applying for a specific United States Civil Service Examination, read the Examination Announcement carefully. Show all descriptions, and mail this application to the office named therein. If none, mail with an explanation in letter to the U. S. CIVIL SERVICE COMMISSION, WASHINGTON, D. C., unless otherwise directed. Notify same office of any change of address.

APP. NO.

1. Name of examination, if any, or name of position applied for:		AV. This space for U. S. Civil Service Commission		U. S. Civil Service Commission	
2. Place of examination (if a written test), or place of employment applied for: (City and State)					
3. Optional subject (if mentioned in examination announcement):					
4. Mr. Mrs. Miss <b>Ann Lorene Goodpasture</b> (First name) (Last) ( Maiden, if any)		O. S. <input type="checkbox"/>		<input type="checkbox"/>	
5. <b>247 Delaware Ave., Apt. 308, S. W.</b> <b>Washington, D. C.</b> (City and State)		C. <input type="checkbox"/>		<input type="checkbox"/>	
6. Date of birth (month, day, year): <b>11-28-1918</b>		7. Age last birthday: <b>25</b>		8. Date of this application: <b>1-1944</b>	
9. Legal or voting residence: State <b>Oklahoma</b>		10. Telephone numbers: <b>RE 7500</b> (Residence phone) <b>Ext. 71452</b> (Business phone)		11. (a) Check one: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Separated	
12. (a) Check one: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		13. Height, with shoes: <b>5 ft 1 in.</b> Weight: <b>110</b> lb		14. Preference: <input type="checkbox"/> Allowed <input type="checkbox"/> Not Ex. <input type="checkbox"/> Closed	
15. Where were you born? <b>Colina, Tennessee</b>		16. (a) Check one: <input type="checkbox"/> Indian <input type="checkbox"/> Material not		17. (b) Check one: <input type="checkbox"/> Material not	

Indicate "Yes" or "No" answer by placing X in proper column		Yes	No	Indicate "Yes" or "No" answer by placing X in proper column		Yes	No	
14. Are you a citizen of the United States? Unless otherwise instructed, naturalized citizens must submit, along with this application, Naturalization Certificate, other foreign-born documentary proof of citizenship. Documents will be returned.				<input checked="" type="checkbox"/>	<input type="checkbox"/>	22. (a) Were you ever in the U. S. military or naval service? If so, give branch of service and date of last discharge: Army, Navy, Marine, Coast Guard, Date		<input checked="" type="checkbox"/>
15. Have you ever been arrested, or summoned into court as a defendant, or indicted, or convicted or fined or imprisoned, or placed on probation, or has any case against you been filed, or have you ever been ordered to deposit collateral for alleged breach or violation of any law or rule or regulation or ordinance or statute? If so, list all cases, without any exception whatsoever, under Item 45, page 4, giving in each case (1) the date, (2) your age at the time, (3) the place where the alleged offense or violation was committed, (4) the name and location of the court, (5) the nature of the offense or violation, (6) the penalty, if any, imposed, or other disposition. The above question includes arrests by military or naval authorities and disciplinary action imposed by courts martial as well as in civil cases. If arrested, your fingerprints will be taken.				<input checked="" type="checkbox"/>	<input type="checkbox"/>	23. Have you registered under the Selective Service Act? If so, give name and number of local board.		<input checked="" type="checkbox"/>
16. (a) Have you any physical defect or disability whatsoever? (b) Have you ever had a nervous breakdown? If your answer to either (a) or (b) is yes, give full particulars under Item 45, page 4.				<input checked="" type="checkbox"/>	<input type="checkbox"/>	24. (a) Are you now a member of any branch of military or naval reserve? If so, give name of organization. (b) Are you now on active duty?		<input checked="" type="checkbox"/>
17. Do you advocate or have you ever advocated, or are you now or have you ever been a member of any organization that advocates the overthrow of the Government of the United States by force or violence? If so, give complete details under Item 45.				<input checked="" type="checkbox"/>	<input type="checkbox"/>	25. Give number of persons completely dependent on you, other than husband or wife: <b>NONE</b>		<input checked="" type="checkbox"/>
18. Have you ever been discharged for misconduct or unsatisfactory service, or forced to resign from any position? If so, state (under Item 45) when and where employed and give the name and address of your employer and the reason for your discharge or forced resignation in each case.				<input checked="" type="checkbox"/>	<input type="checkbox"/>	26. Would you accept short term appointment? If so, state: <b>3 months</b>		<input checked="" type="checkbox"/>
19. Within the past 12 months, have you used intoxicating beverages? If so, specify: <b>Occasionally</b> <b>Habitually</b> <b>To excess</b>				<input checked="" type="checkbox"/>	<input type="checkbox"/>	27. (a) Would you accept appointment anywhere offered in the United States? Give location preference: (b) Would you accept appointment outside the United States? Give location preference: (c) Would you accept appointment in Washington, D. C.? If so and if you are applying for a specific examination, make to the examination announcement to see if the Certificate of Residence (S. C. Form 12) is to be submitted. Proof of residence is required for many kinds of positions.		<input checked="" type="checkbox"/>
20. Are any members of your family or relatives (either by blood or by marriage), employed by the United States Government, excluding persons in the armed forces? If so, give name, address, relationship, and branch of service of each such relative under Item 45.				<input checked="" type="checkbox"/>	<input type="checkbox"/>	28. What is the lowest entrance salary you will accept? \$ <b>1700 to 2000</b> yr. You will not be considered for positions paying less.		<input checked="" type="checkbox"/>
21. Are you NOW employed by the Federal Government? (a) If so <b>War Relocation Authority</b> <b>Barr Building, Washington, D. C.</b> (b) If you now are or have ever been so employed, give dates: from <b>19</b> (Month) <b>19</b> (Year) to <b>19</b> (Month) <b>19</b> (Year)				<input checked="" type="checkbox"/>	<input type="checkbox"/>	29. If you are willing to travel, specify: <input checked="" type="checkbox"/> Occasionally <input type="checkbox"/> Frequently <input type="checkbox"/> Constantly.		<input checked="" type="checkbox"/>
22. How much notice will you require to report for work?				<input checked="" type="checkbox"/>	<input type="checkbox"/>	30. How much notice will you require to report for work?		<input checked="" type="checkbox"/>

Print or type your name here as in item 4

**Miss Ann Lorene Goodpasture**

30. (a) Have you ever filed applications for any Federal civil service examinations? (If so list them below)

Yes No

Title of examinations	Examined in what class	Month and year	Rating

(b) Have you passed any State or other civil service examination other than the above within the last 5 years? (If so give details under item 45)

Yes No

31. EDUCATION (a) Circle highest grade completed: elementary or high school 1 2 3 4 5 6 7 8 9 10 (11) Did you graduate? Yes No

Name and location of school	Dates attended		Years completed		Degrees conferred		Semester hours credit
	From	To	Day	Night	Title	Date	
(b) College or university <b>University of Oklahoma</b> <b>Norman, Oklahoma</b>	<b>1937</b>	<b>1941</b>	<b>4</b>		<b>B.S.</b>	<b>1941</b>	<b>127</b>

(c) Other: **Business University** **Business Administration**  
**Oklahoma City, Oklahoma** **Accounting and Stenotypy**

List your four chief undergraduate subjects		Semester hrs.	List your four chief graduate subjects		Semester hrs.
<b>Commercial &amp; Advertising</b>		<b>50</b>	<b>Business Administration</b>		
<b>English</b>		<b>20</b>	<b>Accounting</b>		
<b>Psychology</b>		<b>12</b>	<b>Stenotypy</b>		
<b>History</b>		<b>12</b>			

32. Indicate your knowledge of foreign languages.	READ			SPEAK			UNDERSTAND		
	Good	Fair	Poor	Good	Fair	Poor	Good	Fair	Poor
<b>French</b>	<b>X</b>			<b>X</b>			<b>X</b>		

34. Are you now a licensed member of any trade or profession (such as electrician, radio operator, pilot, lawyer, CPA, etc.)? Yes No  
If not, have you ever been licensed? Yes No  
Give kind of license and State **Instructor, Okla.**  
Earliest license (year) **1941**  
Most recent license (year) **1941**

35. REFERENCES: List five persons, who are not related to you by blood or marriage, who live in the United States, on 1 who are or have been mainly responsible for choice direction of your work, or who are in a position to judge your work critically in those occupations in which you regard yourself as best qualified.

Full name	Address (If not complete address, state city and state)	Business or occupation
<b>Hall</b>	<b>Elko Photographic Finishing Co.</b>	<b>Oklahoma City, Oklahoma</b>
<b>J. C. Prosky</b>	<b>Office of Price Administration</b>	<b>Washington, D. C.</b>
<b>A. Howard</b>	<b>OPA Economist</b>	<b>Washington, D. C.</b>
<b>H. Sanders</b>	<b>Tipton, Oklahoma</b>	<b>Pres. First Nat'l Bank</b>

36. May inquiry be made of your present employer regarding your character, qualifications, etc.? Yes No

37. EXPERIENCE In the space furnished below give a record of every such event, both public and private, which you have had since you first began to work. Start with your present position and work back to the first position you held, accounting for all periods of unemployment. Describe your field of work and position, and, except for employments held less than three months, give your duties and responsibilities in such detail as to make your qualifications clear. Give name you used on pay roll if different from that given on this application.

PRESENT POSITION	Place		Exact title of your position	Salary	
	From	Date		Starting \$	Final \$
	<b>Washington, D. C.</b>	<b>Dec. 1, 1943</b>			
Name of employer:			Duties and responsibilities:	<b>See attached sheet</b>	
Address:					
Kind of business or organization:					
Number and class of employees you supervised:					
Name and title of your immediate supervisor:			Machinery and equipment you used:		

O-2094-1

DO NOT WRITE IN THIS SPACE

Place <b>Washington, D. C.</b> From <b>June 43</b> To <b>Sept. 43</b> Name of employer: <b>OPA</b> Address <b>Washington, D. C.</b> Kind of business or organization: <b>Government</b> Number and class of employees you supervised: <b>1 CAF-3</b> Name and title of your immediate supervisor: <b>Ruth C. Prosky</b> Reason for leaving: <b>Other's illness (needed at home)</b>	Exact title of your position: <b>Jr. Employee Ser. Officer</b> Starting: \$ 2000. <b>Financial Advisor</b> Per Yr. Final: \$ 2000. Duties and responsibilities: <b>Advisor on all financial activities pertaining to collection and disbursement of funds for all campaigns for personnel of OPA. Responsible for setting up accounts, handling of cash, and submitting reports. Under bond. (Emergency Loan Fund of approx. \$1500; Recreation Fund \$1000. (employee contributions); War Savings Bonds (pay roll and cash); Group Hospitalization collections, \$800. monthly; Asst. Trans. of OPA Credit Union. Responsible for 3 bank accounts. Investigated insurance &amp; credit companies. Wrote reports and memoranda. Typewriter, adding machine &amp; Calculator</b> Machines and equipment you used: <b>Excellent efficiency rating</b>
Place <b>Washington, D. C.</b> From <b>Oct. 42</b> To <b>June 43</b> Name of employer: <b>OPA</b> Address <b>Washington, D. C.</b> Kind of business or organization: <b>Government</b> Number and class of employees you supervised: <b>1 CAF-3</b> Name and title of your immediate supervisor: <b>Ruth C. Prosky</b> Reason for leaving: <b>Promotion</b>	Exact title of your position: <b>Transportation Officer</b> Starting: \$ 1800. <b>Employee Services Clerk</b> Per Yr. Final: \$ 2000. Duties and responsibilities: <b>Employee Relations duties involving interviewing, organization of various agency campaigns, responsible for safe, setting up and maintaining accounts for above mentioned funds. Transportation Officer - organized car clubs (500) certified applicants for supplemental rations. Wrote reports and memoranda. Worked with various sections of agency (Administrative Officers) in selecting representatives for promoting agency campaigns &amp; war bonds sales. Administrative Assistant to Head of Section.</b> Machines and equipment you used: <b>Typewriter, adding machine, &amp; calculator</b>
Place <b>Washington, D. C.</b> From <b>April 42</b> To <b>Oct. 42</b> Name of employer: <b>same as above</b> Address <b>Washington, D. C.</b> Kind of business or organization: <b>Government</b> Number and class of employees you supervised: <b>1 CAF-3</b> Name and title of your immediate supervisor: <b>Ruth C. Prosky</b> Reason for leaving: <b>Promotion</b>	Exact title of your position: <b>Personnel Clerk</b> Salary Starting: \$ 1620 Per Yr. Final: \$ 1800 Duties and responsibilities: <b>Transportation Officer for OPA personnel in organization of car clubs. Responsible for planning and setting up of war bonds pay roll allotment plan. Disseminated information regarding all agency campaigns, such as Community War Fund, Red Cross, United Relief, etc. Wrote reports and memoranda. Various bookkeeping and accounting assignments. Excellent efficiency rating</b> Machines and equipment you used: <b>Typewriter, adding machine &amp; calculator</b>
Place <b>Washington, D. C.</b> From <b>March 42</b> To <b>April 42</b> Name of employer: <b>OEM-OPA</b> Address <b>Washington, D. C.</b> Kind of business or organization: <b>Government</b> Number and class of employees you supervised: <b>none</b> Name and title of your immediate supervisor: <b>Ruth Prosky</b> Reason for leaving: <b>Promotion</b>	Exact title of your position: <b>Clerk</b> Salary Starting: \$ 1440 Per Yr. Final: \$ 1620 Duties and responsibilities: <b>General personnel clerk. Performed various clerical and secretarial duties in the personnel section.</b> Machines and equipment you used: <b>Typewriter &amp; Stenotype</b>

If more space is required, use a Continuation Sheet (Standard Form No. 58) or a sheet of paper, size 8 x 10 1/2 inches. Write on each sheet your name, full address, date of birth, and examination title (if any). Enclose, unattached, with application.

G-22094-1

22. Do you hold any position or office under any State, Territory, county or municipality? \_\_\_\_\_  
If so, give details under item 49. \_\_\_\_\_ Yes No

20. Do you receive any pension or other benefit (exclusive of Adjusted Service Credit) for military or naval service, or an annuity from the U.S. Government under any Retirement Act? ☒ Yes ☐ No  
If so give details under item 45

40. Show name and address of wife's (or husband's) employer (if none, write None).

41. (a) Were any of the following members of your family born outside Continental U. S. A. ? ☒

Wife Husband Father Mother  
If an, indicate which by marking the appropriate space, and show under item  
45 for each (1) full name including maiden name of wife or mother; (2)  
birthplace; (3) native citizenship; and (4) if U.S. naturalized, date of naturalization.

(b) Have you any relatives, by blood or by marriage (excluding persons in the U. S. armed forces), now living in a foreign

country? .....

If so, for each relative show under Item 45 the (1) name, (2) relationship (3) place of residence, (4) birthplace, (5) present citizenship, and (6) whether transient or resident.

42. List any special skills not shown in Question 37, such as operation of short-wave radio, multith, key-punch, turret lathe, or scientific or professional devices.

**WFL** ..... **SKILL** .....

**WILL** ..... **SKILL** .....

Words per minute in typing 60-65 ..... stenography.....

Do you have a license to operate an automobile? ☒ Yes ☐ No

41. State what kind of work you prefer: .....

44. Give any special qualifications not covered elsewhere in your application, such as (a) your more important publications (do NOT submit copies unless requested), (b) your patents or inventions; (c) holdings, construction of instruments, etc.

**41. Space for detailed answers to other questions:**

Item No. Write in left column numbers of items to which detailed answers apply.

[illegible]

If more space is required, use a sheet of THIN paper, size 8 x 10 3/4 inches. Write on each sheet your name, full address, date of birth, and examination title (if any). Use one side only. Enclose, unattached, with application.

If you claim preference for the Indian Service as an Indian, you must file with this application a certificate from the superintendent of the Indian agency where you are registered, or from the Commissioner, Bureau of Indian Affairs, showing that you have at least one-fourth Indian blood.

**JURAT (OR OATH).**--This jurat (or oath) must be executed.

The following oath must be taken before a notary public, the secretary of a United States civil service board of examiners, or other officer authorized to administer oaths, before whom the applicant must appear in person. The following are among those not authorized to administer this oath: Postmasters (except in Alaska), Army officers, post-office inspectors, and chief clerks and assistant chief clerks in the Railway Mail Service.

The composition and work in connection with any material required to be submitted for this examination are entirely my own, except where I have given full credit for quoted matter or the collaboration of others by quotation marks and references, and in the composition of the same I have received no assistance except as indicated fully in my explanatory statement.

I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in answer to the foregoing questions are full and true to the best of my knowledge and belief. SO HELP ME GOD.

If female prefix "Miss" or "Mrs " and if married use your own given name as "Mrs Mary L. Doe"

(Signature of applicant)

10. WITH PEN AND INK your name—give given name, initial or initials, and surname)

Subscribed and duly sworn to before me according to law by the above-named applicant this 25 day of Jan, 1917 at city [or town] of West county of Cal and State [or Territory or District] of Cal

(Signature of officer)

(Official title)

Standard Form No. 57

Approved April 9, 1942

U. S. CIVIL SERVICE COMMISSION

C. S. C. Dept. Cir. No. 334

For Question 37, "Application for Federal Employment," Standard Form No. 57

## CONTINUATION SHEET

Fill in this form only when necessary for completion of "Record of Previous Employment" question on Standard Form No. 57. Enclose, unattached, with your application. Type in or use BLACK ink and print. USE ONE SIDE ONLY.

Title of examination (if submitted as an application for same):

1. Date of birth (Month, day, and year)

2. Applicant's first, middle, and last names, and full address

11-28-1918

Miss Anna Lorene Goodpasture

Place Oklahoma City, Oklahoma

From Sept. 1941 To Feb. 1942

Name of employer

Elko Photo Finishing Company

Address Oklahoma City, Oklahoma

Kind of business or organization

Private industry

Number and class of employees you supervised 1 to 15

Name and title of your immediate supervisor

Geo. Dempsey, Manager

Reason for leaving came to Washington

Place

From 19 To 19

Name of employer

Address

Kind of business or organization

Number and class of employees you supervised

Name and title of your immediate supervisor

Reason for leaving

Place Norman, Oklahoma

From 19 To 19

Name of employer

Oklahoma University

Address Norman, Oklahoma

Kind of business or organization

Fine Arts Department

Number and class of employees you supervised none

Name and title of your immediate supervisor

Mrs. Peters

Reason for leaving end of school

Place

From 19 To 19

Name of employer

Address

Kind of business or organization

Number and class of employees you supervised

Name and title of your immediate supervisor

Reason for leaving

Exact title of your position Secretary

Salary, Starting, \$ 60.00

& Photographic Finishing

Per mo. Final, \$ 85.00

Duties and responsibilities: Bookkeeper, pay roll clerk, and secretary to manager. During his absence was in complete charge of office (approximately 35 to 40 employees who did photographic finishing). During rush weeks, I worked overtime as a photographic printer, enlarger, or at any place where the workload was particularly heavy. (I have had my own darkroom laboratory since a child so that I was quite familiar all types of photographic finishing). I figured time cards weekly and made out pay roll. Kept

Machines and equipment you used

Exact title of your position

Salary, Starting, \$

Per Final, \$

Duties and responsibilities

the accounts for approximately 300 drug stores and other firms which acted as representatives of the finishing company in sending films for processing and developing. Prepared monthly statements for each organization. This was in addition to the other office accounts.

Machines and equipment you used

Exact title of your position

Salary, Starting, \$ 15

Office Clerk

Per mo. Final, \$ 20

Duties and responsibilities

General office work while attending college. Graduated from the University of Oklahoma in 1941. I do not recall the exact dates which I worked. A substantial part of my school expenses was paid by work at the University and also typing of theses. Also was a free lunch photographer. Average combined earnings per month from 1937 to 1941 were approximately \$30.

Machines and equipment you used

Exact title of your position

Salary, Starting, \$

Per Final, \$

Duties and responsibilities

Machines and equipment you used

If more space is required, use another continuation sheet or a sheet of THIN paper, size 8 x 10 1/2 inches. Write on each sheet your name, address in full, and examination title (if any). Use one side only. Enclose, unattached, with application.

U. S. GOVERNMENT PRINTING OFFICE: 1942-O-45240



Attachment

Present Position:

At the present time I am working in two places: one position is with the War Relocation Authority in the Placement and Training Unit of the Personnel Management Section which consists principally of clerical duties; the other position is with Congressional Intelligence, a private news service, the work consists of preparing for publication various legislative reports, press releases and current congressional information. The combined salaries amount to \$204. per month.

The Civil Service position which I now have is a grade CAF-3 \$1620. Although I am now doing personnel work, I do not feel that I am utilizing to the fullest extent my experience and educational qualifications and would be interested in transferring to any position for which I am qualified. I would prefer a position with a salary which would not necessitate my being on two jobs at one time.

I have no objection to a secretarial position if it is of a responsible nature, however I feel that I am better qualified for a Junior Administrative, Personnel or clerical accounting position.



## PERSONAL HISTORY STATEMENT

INSTRUCTIONS: ANSWER ALL QUESTIONS COMPLETELY. IF QUESTION DOES NOT APPLY, WRITE "NOT APPLICABLE". WRITE "UNKNOWN" ONLY IF YOU DO NOT KNOW THE ANSWER AND CANNOT OBTAIN THE ANSWER FROM PERSONAL RECORDS. USE A SEPARATE SHEET OF PAPER FOR EXTRA DETAILS ON ANY QUESTION OR QUESTIONS FOR WHICH YOU DO NOT HAVE SUFFICIENT ROOM. ATTACH TWO RECENT PASSPORT SIZE PICTURES TO THIS FORM. STATE TAKEN WRITTEN ON THE BACK OF EACH. TYPE, PRINT OR WRITE CAREFULLY. ILLEGIBLE OR INCOMPLETE FORMS WILL NOT RECEIVE CONSIDERATION.

HAVE YOU READ AND UNDERSTOOD THE ABOVE INSTRUCTIONS? YES ☐ NO ☐

## SECTION 1: PERSONAL BACKGROUND

NAME: FIRST **Ann** MIDDLE **Lorene** LAST **Goodpasture** TELEPHONE **Bombay 30083**  
 MR. ☐ MISS ☒ MRS. ☐  
 PRESENT ADDRESS: STREET AND NUMBER: **American Consulate General** CITY: **Bombay** STATE: **Bombay Province** COUNTRY:  **Dominion of India**  
 LEGAL RESIDENCE: STREET AND NUMBER: **American Consulate General** CITY: **Bombay** STATE: **Bombay Province** COUNTRY:  **Dominion of India**  
 NICKNAMES: **none** OTHER NAMES THAT YOU HAVE USED: **Not applicable**  
 UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? **nil** HOW LONG? **nil**  
 IF LEGAL CHANGE, GIVE PARTICULARS (WHERE, WHEN AND BY WHAT AUTHORITY): **not applicable**

DATE OF BIRTH: **Nov. 28, 1918** PLACE OF BIRTH: **Celina** CITY: **Tennessee** STATE: **U.S.A.** COUNTRY:  
 PRESENT CITIZENSHIP: **American** ACQUIRED BY: **BIRTH** ☒ MARRIAGE ☐ NATURALIZATION ☐  
 NATURALIZATION CERTIFICATE: **not applicable** NUMBER: **not applicable** DATE ISSUED: **nil** NAME OF COURT: **nil**  
 LOCATION OF COURT: **Not applicable** CITY: STATE: COUNTRY:  
 PREVIOUS CITIZENSHIP: **Not applicable** DATE HELD: **nil** FROM: **nil** TO: **nil**  
 OTHER CITIZENSHIPS (GIVE PARTICULARS): **None**

## STEPS TAKEN TO CHANGE PRESENT NATIONALITY (GIVE PARTICULARS)

**None**  
 LAST U.S. PASSPORT: **SP-713** NUMBER: **March 1947** DATE: **Washington, D.C., USA** PLACE OF ISSUE:  
 ALL OTHER U.S. PASSPORTS YOU HAVE HAD (GIVE APPROXIMATE DATES): **Special Passport issued 1944 at Washington D.C., USA number unknown**  
 PASSPORTS OF OTHER NATIONS: **None**

IF BORN OUTSIDE U.S.: **Not applicable** DATE OF ARRIVAL IN THIS COUNTRY: **nil** PORT OF ENTRY: **nil** PASSPORT OF COUNTRY: **nil**  
 LAST U.S. VISA: **nil** NUMBER: **nil** TYPE: **nil** DATE: **nil** PLACE OF ISSUE: **nil**

## SECTION 2: PHYSICAL DESCRIPTION

AGE: **29** SEX: **female** HEIGHT: **5'2 1/2"** WEIGHT: **98 lbs.** EYES: **brown** HAIR: **brown**  
 COMPLEXION: **fair** SCARS: **scar on right thumb (broken nail)** BUILD: **small**  
 OTHER DISTINGUISHING FEATURES: **None**



<b>SECTION 3. MARITAL STATUS</b>									
MARRIED <input type="checkbox"/>		WIDOWED <input type="checkbox"/>		SEPARATED <input type="checkbox"/>		DATE OF SEPARATION OR DIVORCE		PLACE	
SINGLE <input checked="" type="checkbox"/>		DIVORCED <input type="checkbox"/>							
REASON FOR SEPARATION OR DIVORCE: not applicable									
NOTE: IF YOU HAVE BEEN MARRIED MORE THAN ONCE-USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND AND GIVE DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES: not applicable									
NAME OF WIFE OR HUSBAND		FIRST		MIDDLE (FOR WIFE, MAIDEN)		LAST		DATE OF MARRIAGE	
PLACE OF MARRIAGE		(HIS OR HER) ADDRESS BEFORE MARRIAGE		STREET AND NUMBER		CITY		STATE COUNTRY	
LIVING <input type="checkbox"/>		DATE OF DECEASE		CAUSE					
DECEASED <input type="checkbox"/>									
PRESENT OR LAST ADDRESS		STREET AND NUMBER		CITY		STATE		COUNTRY	
DATE OF BIRTH		PLACE OF BIRTH		CITY		STATE		COUNTRY	
CITIZENSHIP		DATE ACQUIRED		WHERE ACQUIRED		CITY		STATE COUNTRY	
OCCUPATION		LAST EMPLOYER							
EMPLOYER'S OR OWN BUSINESS ADDRESS		STREET AND NUMBER		CITY		STATE		COUNTRY	
DATE OF MILITARY SERVICE		FROM:		TO:		BRANCH OF SERVICE		COUNTRY	
OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS)									
<b>SECTION 4. CHILDREN OR DEPENDENTS (INCLUDE PARTIAL DEPENDENTS) none</b>									
NAME		RELATIONSHIP						AGE	
CITIZENSHIP		ADDRESS STREET AND NUMBER		CITY		STATE		COUNTRY	
NAME		RELATIONSHIP						AGE	
CITIZENSHIP		ADDRESS STREET AND NUMBER		CITY		STATE		COUNTRY	
NAME		RELATIONSHIP						AGE	
CITIZENSHIP		ADDRESS STREET AND NUMBER		CITY		STATE		COUNTRY	
<b>SECTION 5. PARENTS</b>									
NOTE: FOR STEPFATHER, STEPMOTHER AND/OR GUARDIAN, GIVE THE SAME INFORMATION AS REQUIRED BELOW ON SEPARATE SHEET									
NAME OF FATHER		FIRST		MIDDLE		LAST		LIVING <input checked="" type="checkbox"/>	
		G.		H.		Goodpasture		DECEASED <input type="checkbox"/>	
DATE OF DECEASE		not applicable		CAUSE nil					
PRESENT OR LAST ADDRESS		STREET AND NUMBER		CITY		STATE		COUNTRY	
		North Main		Tipton		Oklahoma		USA	
DATE OF BIRTH		between 1890 and 1900 (?)		PLACE OF BIRTH		CITY		STATE COUNTRY	
				Celina		Tennessee		USA	
CITIZENSHIP		DATE ACQUIRED		WHERE ACQUIRED		CITY		STATE COUNTRY	
American		by birth		birthplace					
OCCUPATION		Real Estate		LAST EMPLOYER self					
EMPLOYER'S OR OWN BUSINESS ADDRESS		STREET AND NUMBER		CITY		STATE		COUNTRY	
		North Main		Tipton		Oklahoma		USA	
<b>SECTION 5. PARENTS (CONTINUED) (PAGE 3)</b>									

SECTION 5. PARENTS. (CONTINUED PAGE 2)							
DATE OF MILITARY SERVICE		FROM: <b>not applicable</b>		TO:		EYES OR SERVICE	
OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS)							
<b>not applicable</b>							
NAME OF MOTHER		FIRST		MAIDEN		LAST	
<b>Ann</b>		<b>Went</b>		<b>Goodpasture</b>		LIVING <input checked="" type="checkbox"/> DECEASED <input type="checkbox"/>	
DATE OF DECEASE		CAUSE					
<b>not applicable</b>		<b>nil</b>					
PRESENT OR LAST ADDRESS		STREET AND NUMBER		CITY		STATE	
<b>not applicable</b>		<b>No- 022</b>		<b>Tipton</b>		<b>Oklahoma</b>	
DATE OF BIRTH		PLACE OF BIRTH		CITY		STATE	
<b>between 1890 and 1900 (a)</b>		<b>between 1890 and 1900 (a)</b>		<b>Hickman</b>		<b>Tennessee</b>	
CITIZENSHIP		DATE ACQUIRED		WHERE ACQUIRED		CITY	
<b>American</b>		<b>by birth</b>		<b>birthplace</b>		<b>USA</b>	
OCCUPATION		LAST EMPLOYER					
<b>none</b>		<b>not applicable</b>					
EMPLOYER'S OR OWN BUSINESS ADDRESS		STREET AND NUMBER		CITY		STATE	
<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>	
GOVERNMENT SERVICE, U.S. OR FOREIGN (GIVE DETAILS)							
<b>none</b>							
SECTION 6. BROTHERS AND SISTERS (INCLUDING HALF-STEP- AND ADOPTED BROTHERS AND SISTERS)							
NAME		FIRST		MIDDLE		LAST	
<b>Robert</b>		<b>J.</b>		<b>Goodpasture</b>			
PRESENT ADDRESS		STREET AND NUMBER		CITY		STATE	
<b>not applicable</b>		<b>not applicable</b>		<b>Tipton</b>		<b>Oklahoma</b>	
NAME		FIRST		MIDDLE		LAST	
<b>C.</b>		<b>M.</b>		<b>Goodpasture</b>		<b>USA</b>	
PRESENT ADDRESS		STREET AND NUMBER		CITY		STATE	
<b>not applicable</b>		<b>not applicable</b>		<b>Tipton</b>		<b>Oklahoma</b>	
NAME		FIRST		MIDDLE		LAST	
<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>	
PRESENT ADDRESS		STREET AND NUMBER		CITY		STATE	
<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>	
SECTION 7. PARENTS-IN-LAW <b>not applicable</b>							
NAME OF FATHER-IN-LAW		FIRST		MIDDLE		LAST	
<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>	
DATE OF DECEASE		CAUSE					
<b>not applicable</b>		<b>not applicable</b>					
PRESENT OR LAST ADDRESS		STREET AND NUMBER		CITY		STATE	
<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>	
DATE OF BIRTH		PLACE OF BIRTH		CITY		STATE	
<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>	
CITIZENSHIP		DATE ACQUIRED		WHERE ACQUIRED		CITY	
<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>	
OCCUPATION		LAST EMPLOYER					
<b>not applicable</b>		<b>not applicable</b>					
NAME OF MOTHER-IN-LAW		FIRST		MAIDEN		LAST	
<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>	
DATE OF DECEASE		CAUSE					
<b>not applicable</b>		<b>not applicable</b>					
PRESENT OR LAST ADDRESS		STREET AND NUMBER		CITY		STATE	
<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>	
DATE OF BIRTH		PLACE OF BIRTH		CITY		STATE	
<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>	
CITIZENSHIP		DATE ACQUIRED		WHERE ACQUIRED		CITY	
<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>		<b>not applicable</b>	
OCCUPATION		LAST EMPLOYER					
<b>not applicable</b>		<b>not applicable</b>					

SECTION 8. RELATIVES **None**

NOTE: INDICATE BELOW THE RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO LIVE ABROAD, ARE UNDER THE INFLUENCE OF A FOREIGN POWER, ARE NOT CITIZENS OF THE UNITED STATES, OR ARE MARRIED TO NON-CITIZENS.

NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY STATE COUNTRY

REASON FOR LISTING UNDER THIS QUESTION

NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY STATE COUNTRY

REASON FOR LISTING UNDER THIS QUESTION

NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY STATE COUNTRY

REASON FOR LISTING UNDER THIS QUESTION

NOTE: INDICATE BELOW THE RELATIVES BY BLOOD OR MARRIAGE, IN MILITARY, NAVAL OR OTHER GOVERNMENT SERVICE (UNITED STATES OR FOREIGN) **None**

NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY STATE COUNTRY

TYPE AND LOCATION OF SERVICE (IF KNOWN)

NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY STATE COUNTRY

TYPE AND LOCATION OF SERVICE (IF KNOWN)

NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS STREET AND NUMBER	CITY STATE COUNTRY

TYPE AND LOCATION OF SERVICE (IF KNOWN)

## SECTION 9. EDUCATION

SCHOOL	Griffin School	ADDRESS	CITY	STATE	COUNTRY
			Celina	Tennessee	USA
DATES ATTENDED	FROM 1925	TO 1928	DEGREE		
SCHOOL	Junior and High School	ADDRESS	CITY	STATE	COUNTRY
			Lang & Tipton	Oklahoma	USA
DATES ATTENDED	FROM 1928	TO 1938	DEGREE		
COLLEGE	University of Oklahoma	ADDRESS	CITY	STATE	COUNTRY
		Norman Oklahoma	Oklahoma	USA	
DATES ATTENDED	FROM 1937	TO 1941	DEGREE		
COLLEGE	Hill's University	ADDRESS	CITY	STATE	COUNTRY
			Oklahoma City	Oklahoma	USA
DATES ATTENDED	FROM 1941	TO 1941	DEGREE		
			Graduate work in reporting and stenograph.		

SECTION 10. SELECTIVE SERVICE **US** (CONTINUED TO PAGE 5)

SECTION 10. SELECTIVE SERVICE <b>US NOT applicable</b>			
CLASSIFICATION	ORDER NUMBER	APPROXIMATE INDUCTION DATE	BOARD NUMBER
ADDRESS OF BOARD	STREET AND NUMBER	CITY	STATE
IF DEFERRED, STATE REASON			
SECTION 11. MILITARY, NAVAL OR OTHER GOVERNMENT SERVICE - UNITED STATES OR FOREIGN <b>NO110</b>			
COUNTRY	SERVICE	SERVICE DATES	TO
GRADE	SERIAL NUMBER	TYPE OF DISCHARGE	
LAST STATION		COMMANDING OFFICER	
REMARKS:			
SECTION 12. CHRONOLOGICAL HISTORY OF EMPLOYMENT (USE ADDITIONAL SHEET IF NECESSARY)			
NOTE: INCLUDE BELOW PERIODS OF UNEMPLOYMENT AND CASUAL EMPLOYMENT. GIVE ADDRESS AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. INCLUDE LAST 5 POSITIONS AND COVER AT LEAST 15 YEARS.			
EMPLOYER		JOB TITLE	
University of Oklahoma		Professor/Transposing & Secretarial	
ADDRESS	STREET AND NUMBER	CITY	STATE
Norman, Oklahoma		University	
YOUR DUTIES AND SPECIALITY		NAME OF SUPERVISOR	
Free lance photography secretarial and transposing of music		Mrs. Peters, Dean, Fine Arts	
DATES COVERED	FROM	TO	SALARY
	1937	1941	\$30-35 per mo.
REASONS FOR LEAVING			
Graduated from University			
EMPLOYER		JOB TITLE	
The Photo Engraving Company		Photo Technician	
ADDRESS	STREET AND NUMBER	CITY	STATE
Oklahoma City, Okla		Commercial photography	
YOUR DUTIES AND SPECIALITY		NAME OF SUPERVISOR	
General Office and photo technician		Geo. Dempsey, Mgr.	
DATES COVERED	FROM	TO	SALARY
	Sept 1942	Feb 1942 parttime	30. mo.
REASONS FOR LEAVING			
part time employment while going to University			
EMPLOYER		JOB TITLE (present)	
U.S. Government		Administrative Assistant	
ADDRESS	STREET AND NUMBER	CITY	STATE
Wash. D.C., India, Ceylon, China		Government	
YOUR DUTIES AND SPECIALITY		NAME OF SUPERVISOR	
Secretarial and administrative		See Section 13) order.	
DATES COVERED	FROM	TO	SALARY (present) PER
	Mar. 1942	date	4149.60 (temp.) annum
REASONS FOR LEAVING			
still here			
EMPLOYER		JOB TITLE	
ADDRESS	STREET AND NUMBER	CITY	STATE

(CONTINUED TO PAGE 6)

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SECTION 12. CHRONOLOGICAL HISTORY OF EMPLOYMENT (CONTINUED FROM PAGE 5)				
YOUR DUTIES AND SPECIALITY			NAME OF SUPERVISOR	
DATES COVERED	FROM:	TO:	SALARY	PER
REASONS FOR LEAVING				
EMPLOYER			JOB TITLE	
ADDRESS STREET AND NUMBER		CITY	STATE	KIND OF BUSINESS
YOUR DUTIES AND SPECIALITY			NAME OF SUPERVISOR	
DATES COVERED	FROM:	TO:	SALARY	PER
REASONS FOR LEAVING				
EMPLOYER			JOB TITLE	
ADDRESS STREET AND NUMBER		CITY	STATE	KIND OF BUSINESS
YOUR DUTIES AND SPECIALITY			NAME OF SUPERVISOR	
DATES COVERED	FROM:	TO:	SALARY	PER
REASONS FOR LEAVING				
NOTE: IN SPACE BELOW GIVE DETAILS CONCERNING ANY POSITION FROM WHICH YOU MAY HAVE BEEN DISCHARGED OR WHICH YOU MAY HAVE LEFT UNDER CIRCUMSTANCES WHICH WERE NOT ENTIRELY FAVORABLE. <i>None</i>				
DETAILS:				
SECTION 13. CHARACTER REFERENCES-FIVE IN THE UNITED STATES (GIVE BUSINESS ADDRESS WHERE POSSIBLE)				
NAME	ADDRESS STREET AND NUMBER CITY STATE			
<i>R. C. Prosky</i>	<i>Office for Emergency Management, Wash., D.C.</i>			
NAME	ADDRESS STREET AND NUMBER CITY STATE			
<i>Geo. Greene c/o Nat'l City Bank of N.Y.</i>	<i>55 Wall St., New York, N.Y.</i>			
NAME	ADDRESS STREET AND NUMBER CITY STATE			
<i>Cora LaBois</i>	<i>Department of State, Washington, D.C.</i>			
NAME	ADDRESS STREET AND NUMBER CITY STATE			
<i>Lt. Col. J. T. Spencer</i>	<i>University of Southern Calif., Los Angeles.</i>			
NAME	ADDRESS STREET AND NUMBER CITY STATE			
<i>C. H. Wilbur</i>	<i>Department of State, Washington, D.C.</i>			
SECTION 14. SOCIAL ACQUAINTANCES-FIVE IN THE UNITED STATES (GIVE BUSINESS ADDRESS WHERE POSSIBLE)				
NAME	ADDRESS STREET AND NUMBER CITY STATE			
<i>M. McFarland</i>	<i>Office of Senator Tobey, US Senate, Wash D.C.</i>			
NAME	ADDRESS STREET AND NUMBER CITY STATE			
<i>J. Blades</i>	<i>IRO, 1344 Conn Ave., N.W., Wash., D.C.</i>			
NAME	ADDRESS STREET AND NUMBER CITY STATE			
<i>Dr. I. P. Howard</i>	<i>c/o USPHS, Savannah, Georgia</i>			
NAME	ADDRESS STREET AND NUMBER CITY STATE			
<i>Hubert Humphrey</i>	<i>Office of Mayor, Minneapolis, Minn.</i>			
NAME	ADDRESS STREET AND NUMBER CITY STATE			
<i>John McDonald</i>	<i>J.H. McDonald Insurance Co., Tipton, Oklahoma</i>			
SECTION 15. NEIGHBORS-THREE IN THE UNITED STATES (AT YOUR LAST NORMAL ADDRESS)				

SECTION 15. NEIGHBORS-THREE IN THE UNITED STATES (AT YOUR LAST NORMAL ADDRESS)			
NAME	ADDRESS STREET AND NUMBER	CITY	STATE
M. Maurer	1514 17th St. N.W.	Wash., D.C.	USA
L. Herber	1514 17th St. N.W.	Wash., D.C.	USA
A. Haynes	1514 17th St. N.W.	Wash., D.C.	USA

**SECTION 16. MISCELLANEOUS**

DID YOU EVER HAVE OR DO YOU NOW HAVE MEMBERSHIP IN, OR SUPPORT ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES? YES ☐ NO ☒

IF ANSWER IS "YES", EXPLAIN BELOW:

DO YOU USE, OR HAVE YOU USED, INTOXICANTS? I have.

HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENCE, AND DISPOSITION OF CASE. No.

HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? YES ☐ NO ☒

IF ANSWER IS "YES", GIVE DETAILS BELOW:

**SECTION 17. FINANCIAL BACKGROUND**

ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? YES ☒ NO ☐ IF ANSWER IS "NO", STATE SOURCES OF OTHER INCOME.

NAMES OF BANKS WITH WHICH YOU HAVE ACCOUNTS

First National Bank, Tipton, Oklahoma, USA

National City Bank of New York at Bombay, India.

HAVE YOU EVER BEEN IN BANKRUPTCY? YES ☐ NO ☒ IF ANSWER IS "YES", GIVE PARTICULARS:

**SECTION 18. CREDIT REFERENCES-THREE IN THE UNITED STATES**

NAME	ADDRESS STREET AND NUMBER	CITY	STATE
First National Bank		Tipton	Oklahoma
Union Trust Company	14th & G sts N.W.	Wash., D.C.	USA
Mrs. R. Trafton	Resident Mgr., Copley Courts	Wash., D.C.	

**SECTION 19. RESIDENCES FOR PAST 15 YEARS**

FROM:	TO:	ADDRESS STREET AND NUMBER	CITY	STATE	COUNTRY
1933	1937	Tipton, Okla., Colina and Nashville, Tenn.			
1937	1941	722 Chatauqua St. & U. of O. Norman	Oklahoma	USA	
1941	1942	512 N.W. 9 Street	Oklahoma City, Okla	USA	

(CONTINUED TO PAGE 8)

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## SECTION 19. RESIDENCES FOR PAST 15 YEARS (CONTINUED FROM PAGE 7)

FROM:	TO:	ADDRESS STREET AND NUMBER	CITY	STATE	COUNTRY
1942	1944	2028 Rinlaw Rd N.W.	Washington D.C.		USA
FROM:	TO:	ADDRESS STREET AND NUMBER	CITY	STATE	COUNTRY
1944	1946	Far East (APOs 085, 432, 435, 627, 907 & 908)			
FROM:	TO:	ADDRESS STREET AND NUMBER	CITY	STATE	COUNTRY
6/1946	4/1947	1514 17th St. N.W.	Washington D.C.		USA
FROM:	TO:	ADDRESS STREET AND NUMBER	CITY	STATE	COUNTRY
4/1947	date	American Consulate General, Bombay, India.			
FROM:	TO:	ADDRESS STREET AND NUMBER	CITY	STATE	COUNTRY

## SECTION 20. RESIDENCES OR TRAVEL OUTSIDE THE UNITED STATES

FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE
11/44	8/1946	India, Ceylon, China (APOs 085, 432, 435, 627, 907, 908)	U.S.	GOVT.
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE
4/1947	to date	Bombay	India	U.S. Govt.
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE
FROM: (MO. AND YR.)	TO: (MO. AND YR.)	CITY OR SECTION	COUNTRY	PURPOSE

## SECTION 21. CLUBS, SOCIETIES AND OTHER ORGANIZATIONS

Not applicable

NOTE: IN SPACE BELOW LIST NAMES AND ADDRESSES OF ALL DOMESTIC AND FOREIGN CLUBS, SOCIETIES AND ORGANIZATIONS OF ALL KINDS TO WHICH YOU HAVE BELONGED, OTHER THAN RELIGIOUS SOCIETIES, POLITICAL PARTIES AND LABOR UNIONS. INCLUDE ANY ORGANIZATION HAVING HEADQUARTERS OR A BRANCH IN A FOREIGN COUNTRY OF WHICH YOU HAVE BEEN A MEMBER OR TO WHICH YOU HAVE GIVEN SUPPORT.

NAME	STREET AND NUMBER	CITY	STATE	COUNTRY

## SECTION 22. LANGUAGES-FOREIGN (STATE DEGREE OF PROFICIENCY AS "SLIGHT", "FAIR" OR "FLUENT")

LANGUAGE	SPEAK	READ	WRITE
French	fair	fair	fair
LANGUAGE	SPEAK	READ	WRITE
LANGUAGE	SPEAK	READ	WRITE
LANGUAGE	SPEAK	READ	WRITE
LANGUAGE	SPEAK	READ	WRITE
LANGUAGE	SPEAK	READ	WRITE



# SECTION 23. GENERAL QUALIFICATIONS

INDICATE ANY SPECIAL KNOWLEDGE OR TRAINING YOU HAVE; ALSO, SET FORTH ANY QUALIFICATIONS AS A RESULT OF TRAINING OR EXPERIENCE, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION.

## SECTION 24. SPORTS AND HOBBIES

photography, horseback riding, music, crafts.

## SECTION 25. EMERGENCY ADDRESSEE

either /parents' address or

NAME C.H. Sanders

RELATIONSHIP

ADDRESS First National Bank

City Tipton

State Oklahoma

COUNTRY USA

TELEPHONE

## SECTION 26. INFORMATION AND FINAL COMMENTS

NOTE: YOU ARE INFORMED THAT CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED, AND YOU ARE INVITED TO MAKE ANY CHANGES (OR ADDITIONS) IN YOUR STATEMENTS THAT YOU MAY THINK ADVISABLE.

ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, EITHER AS BEING DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION, IF SO, DESCRIBE, IF NOT, ANSWER, "NO".

None that I recall

## SECTION 27. CERTIFICATION

I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY INTENTIONAL MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR MY IMMEDIATE DISMISSAL.

Bombay, India

25 February 1948

SIGNED AT

City

State

DATE

Witness

Signature of Applicant

## ANNALS

[illegible]

ID#	NAME	POSITION	GALAXY		HIRE DATE	EMPLOYMENT STATUS	TOTAL SERVICE		
			EMPLOYED	PAID			REG	LEAVE	WAG
	App.	Garfield Off.		12000	3/11/48	P.P.A. - DC			
	Dep.	Garfield Off.			3/16/48	P.P.A. - DC			
	App.	Clark-Steno.		91620	12/1/48	War Rel. Admin. - DC			
	Dep.	Clark-Steno.			2/2/49	P.P.A. - DC			
		Clark-Steno.							
	App. Trans.	Clark-Steno. - CAV-4		91800	3/19/48	War Rel. Admin. - DC			
	Dep.	Clark-Steno. - CAV-5		82000	3/17/48	War Rel. Admin. - DC			
	Terminated	Clark-Steno. - CAV-5		000	3/17/48	War Rel. Admin. - DC			
	Dep. Asst.	Clark-Steno. - CAV-5		72000	3/17/48	War Rel. Admin. - DC			
	S. Trans.	Clark-Steno. - CAV-5		52000	3/17/48	War Rel. Admin. - DC			
	S. Trans.	Clark-Steno. - CAV-5		52000	3/17/48	War Rel. Admin. - DC			
	S. Trans.	Clark-Steno. - CAV-5		52000	3/17/48	War Rel. Admin. - DC			
	S. Trans.	Clark-Steno. - CAV-5		52000	3/17/48	War Rel. Admin. - DC			
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194E	55.6	5.00	152.5		107.11	152.11	
194G	122.80	11.00	103.11		107.11	864.61	
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RECORD OF  
PREVIOUS GOVERNMENT  
SERVICE RETURNED TO  
FEDERAL RECORDS CENTER IN  
ST. LOUIS, MO.

DATE 1 APR 1971 BK